(3)

Myths about Hearing Loss: Fact and Fiction

Once you have acknowledged your hearing loss and decided to do something about it, you will receive advice—solicited and unsolicited—from family and friends, and even medical personnel.

Some of this advice and information is accurate, but a large amount of misinformation has been circulated over the years. Listed below are some incorrect statements and the corrected information to help you understand your hearing loss.

Myth: A mild hearing loss is nothing to be concerned about.

Truth: Although you may think that you are not missing important information and seem to be managing, you may not realize that your family and friends are frustrated and that you have begun to feel left out. Not only should you be concerned about your hearing loss, you should do something about it.

Myth: You will be the first person to notice that you have a hearing loss.

Truth: Because hearing loss often occurs gradually, you may not notice it at first. Family members and co-workers often are the first to notice that you need to have questions repeated or that the television is too loud.

Myth: Your hearing loss is normal for your age.

Truth: Hearing loss is not normal at any age; however, hearing loss is more prevalent among older adults than in the general population. Currently, approximately one-third of the population older than sixty-five has some degree of hearing loss.

Myth: You have a sensorineural hearing loss (nerve deafness) and there is nothing you can do about it.

Truth: Most hearing losses can be helped with amplification and assistive listening devices. A majority of people with nerve deafness hear better by wearing hearing aids. This form of hearing loss is not correctable with surgery. Conductive hearing loss, however, is often correctable medically or surgically.

Myth: You would understand people if you listened more carefully.

Truth: Although paying attention, watching the speaker's lips, and observing body language can help you understand the message, no amount of careful listening can make you understand what you can't hear clearly. If you have a hearing loss, you need to acknowledge it and see a trained hearing health care professional for an evaluation to determine if you would benefit from a hearing aid.

Myth: Your hearing loss is not bad enough for a hearing aid.

Truth: Everyone's hearing loss is different. Some hard of hearing people hear well on the telephone; others have difficulty. Some have no problem in a quiet one-on-one situation but have difficulty in a noisy or group setting. You must determine the degree of difficulty you are having, and to-

gether with a trained hearing health care professional, determine your need for a hearing aid.

Myth: A hearing aid will correct your hearing.

Truth: A hearing aid may be helpful, but it is not a cure for hearing loss. Hearing aids are not like eyeglasses; they cannot correct or restore hearing to normal levels, but they will make sounds louder. If your hearing loss can be helped with a hearing aid, then an appropriately prescribed and fitted hearing aid should make your hearing and understanding abilities better, and in turn, improve your quality of life.

Myth: A hearing aid will damage your hearing.

Truth: A hearing aid will *not* damage your hearing.

Myth: Your hearing loss is not bad enough for two hearing aids.

Truth: We normally hear with two ears; therefore, most people with hearing loss in both ears can understand better with two aids than with one.

Myth: Behind-the-ear hearing aids are old fashioned; you will do much better with the newer in-the-ear hearing aids.

Truth: Behind-the-ear hearing aids are as "state of the art" as in-the-ear hearing aids. Some include features not found in the smaller hearing aids, and a particular feature may be important for you. You should work closely with your hearing health care provider to ensure that the aid you get is appropriate for your particular needs. Function, not appearance, is the crucial consideration.

Myth: You should have your hearing tested in your own home where you spend most of your time.

Truth: The hearing test should be conducted in a soundproof room in order to provide the most accurate results. The information gleaned from the test is used to select the most appropriate hearing aid for your individual hearing loss. Only individuals confined to a bed for health reasons should have hearing tests in other sites such as their home.

Myth: You can save a lot of money buying a hearing aid through the mail.

Truth: When you buy a hearing aid, you not only are buying a piece of equipment, you are buying the service of a hearing health care provider in your locality. Unlike eyeglasses, hearing aids require a longer period of adjustment and often modifications that can only be made by trained personnel. The wrong hearing aid, or one that is not fitted properly, can be worse than no hearing aid at all.

Myth: Your hearing loss will not change in the future.

Truth: No one can predict the future. Your hearing loss may remain stable for the rest of your life, or it may change slowly and progressively or suddenly and dramatically.

Myth: Learn to speechread (lipread) and you will understand just fine.

Truth: Many people benefit from taking speechreading lessons; however speechreading is not a substitute for hearing aids but a complement to them. Research studies have found that only about three out of ten words can be speechread clearly, only about 30 to 40 percent of speech is visible, and many words that are visible look the same on the lips (for example, pat and bat, see and tea).