

# Physician's Update Holiday 2013

# Untreated Hearing Loss Linked to Depression, Social Isolation in Seniors

By Terry DeGroot, MD

The holiday season is always an excellent opportunity to discuss the effects of untreated hearing loss on individuals—particularly as it relates to its emotional and social consequences. The National Counsel on Aging (NCOA) continues to study these problems and has widely published its findings over time.

"This study debunks the myth that untreated hearing loss in older persons is a harmless condition, said James Firman, EdD, president and CEO of The National Council on the Aging. The survey of 2,300 hearing impaired adults age 50 and older found that those with untreated hearing loss were more likely to report depression, anxiety, and paranoia and were less likely to participate in organized social activities, compared to those who wear hearing aids.

Hearing loss is one of the most prevalent chronic conditions in the United States, affecting more than nine million Americans over the age of 65 and 10 million Americans age 45 to 64. But about three out of five older Americans with hearing loss and six out of seven middle-aged Americans with hearing loss do not use hearing aids.

### **Consequences of Untreated Hearing Loss**

The survey found that significantly more of the seniors with untreated hearing loss (those who do not wear hearing aids) reported feelings of sadness or depression that lasted two or more weeks during the previous years. Among respondents with more severe hearing loss, 30 percent of non-users of hearing aids reported these sad feelings, compared to 22 percent of hearing aid users.

Another measure of emotional distress is the perception that "other people get angry at me for no reason," which psychologists often identify as an indicator of paranoia.

Older non-users were more likely to agree with the statement "people get angry with me usually for no reason" (14 percent of users vs. 23 percent of non-users). Among those with more severe hearing loss, the difference was even greater—14 percent for users vs. 36 percent for non-users

Because social isolation is a serious problem for some older people, the study also examined social behavior and found that people who don't use hearing aids are considerably less likely to participate in social activities. Among respondents with more severe hearing loss, 42 percent of hearing aid users participate regularly in social activities compared to just 32 percent for non-users.

Carolyn Holmes, PhD., of the Seniors Research Group said, "This survey is ground-breaking not only in the large size of the sample but also in the inclusion of 2,090 close family members or friends of the hearing-impaired respondents who were asked a parallel set of questions."

An Italian study, published in Acta Otorhinolaryngologica Italica, involved working adults aged 35 to 55 who were affected by mild to moderate hearing loss in both ears. In this study, those with hearing loss reported higher levels of disability and psychological distress—and lower levels of social functioning—then a well-matched normal control population. The hearing-impaired individuals experienced reduced ordinary social activities, increased relational problems with family and friends, and greater



emotional difficulties at work. They also showed higher levels of anxiety, depression, phobic anxiety, interpersonal sensitivity, and hostility.

Another survey, released by Australian Hearing, also found that people who suffer from hearing loss may be at increased risk of developing the debilitating effects of depression. The survey found that 60 percent of those with hearing loss had displayed symptoms associated with depression. And almost 20 percent demonstrated at least three key symptoms of depression. Specifically, 52 percent had displayed increased irritability and frustration; 22 percent had trouble sleeping or experienced restlessness, and 18 per cent showed a loss of interest or pleasure in most activities.

#### **Benefits of Treatment**

Hearing aid users reported significant improvements in many areas of their lives, ranging from their relationships at home and sense of independence to their social life. In virtually every dimension measured, the families of hearing aid users also noted the improvements but were even more likely than the users to report improvements.

The good news is that research also indicated that hearing aids can help. A study published in the Archives of Gerontology and Geriatrics examined the effects of hearing aids on cognitive function and depressive signs in people 65 and older. Researchers found that after three months of using a hearing aid, all patients showed significant improvement in their psychosocial and cognitive conditions.

What's more, in a recently published study, BHI examined the impact of hearing aids on specific quality of life factors that affect mental and emotional well-being. More than half of the 1,800 hearing aid owners surveyed said they attributed their use of hearing aids to improvements in their relationships at home, their ability to join in groups, and their social life. Close to half said they saw improvements in their self confidence, sense of safety, feelings about themselves, and sense of independence, one third indicated their mental and emotional life improved.

"By raising awareness of the connection between untreated hearing loss and depression, we hope to make a difference in people's lives and to mobilize individuals to address their hearing loss."

#### **Barriers to Hearing Aid Use**

Why are there so many older people with hearing impairment who do not use hearing aids? More than two-thirds of the older, non-user respondents said "my hearing is not bad enough" or "I can get along without one." About one-half of the non-users cited the cost of hearing aids. And one-in-five offered the explanation that "it would make me feel old," or "I'm too embarrassed to wear one."

"It is very sad that millions of older people are letting denial or vanity get in the way of treatments that can significantly improve the quality of their lives," said Dr. Firman, who is hearing impaired himself. "Doctors and family members should insist that hearing impaired seniors seek appropriate treatment."

Dr. Terry DeGroot has expanded his availability at all three Comprehensive Ear & Hearing locations for medical ear & hearing care including cerumen management.

If you have a patient with any of the following symptoms an appointment with Dr. DeGroot is recommended:

- · Sudden hearing loss or noticeable change in hearing
- Ringing in the ears
- Ear pain or pressure
- History of ear wax accumulation

Cerumen management in particular is key to ear and hearing health and hygiene.

#### Our Services Include:

- Audiological testing
  Hearing instruments
  Custom sound & swim plugs
  - Free hearing instrument trials
    Free consultations
  - Repairs and maintenance on all makes of hearing instruments
    - Medical ear & hearing care and wax removal by ENT
- Medicare and most insurance accepted
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## **Office Hours**

Monday - Friday 8:30 am - 5:00 pm After hours appointments available by request.



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Please refer any patients you suspect may have a hearing loss to one of our offices for a complete audiological evaluation!



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HIS, Owner

M.D.

BA. BC-HIS. Owner