

My hearing loss is normal, umm, for my age

By Becky Vargo/Grand Haven Tribune Jan 26, 2021

Recently, I went to a hearing instrument specialist and had my hearing tested. Apparently, this is something I should have done several years ago, at least to get some sort of baseline. Specialist Kristin Johnston says people should look at this the same way as they do getting a physical or dental check-up, although maybe not so often, unless you are having problems. She recommends getting your first test at age 45 or 50. If you do get this baseline going, it gives professionals a starting point to be able to measure normal hearing loss that is expected to happen as you age. “The results of the test will show very clearly if it’s hearing loss for which hearing aids are the treatment,” Johnston said, “or if hearing loss could be attributable to a medical condition.” Johnston emphasizes that she does not have a medical practice and would refer a client to a doctor or a specialist if a medical problem is suspected.

It also helps take away some of the fear of getting your hearing checked. Heck, it’s not like going to the dentist. Here, you sit in a booth with a window facing the tester. At Comprehensive Ear & Hearing (formerly Grand Haven Ear and Hearing), the door also has a big window, which helps to keep you from getting claustrophobic, Johnston says. I was more distracted by the tiny dots on the walls that must have been part of the soundproofing.

First, Johnston looks in your ears to see if there is any wax buildup or if you have a perforated eardrum. That’s as far as she can see with the naked eye. Then you go into the sound booth, where Johnston places a form of ear bud in each ear. Because of the COVID-19 pandemic, we are wearing masks and trying to stay as separated as possible. She also tells me to raise my hand on the side I hear the tone when I do hear it. Prior to COVID-19, the patient would hold a device and press a button. The old-fashioned hand-raising way eliminates more things that need to be sanitized between every customer.

Johnston sits at a device with a bunch of dials and buttons on the outside of the booth. She is also wearing a headset and we can communicate as needed. She tells me to raise my right hand every time I hear a tone on the right side. Obviously the same goes for my left. She plays a series of high and low-pitch tones for each ear. I had to really concentrate to catch some of the tones. I did not hear all of them.

Still, my hearing was in the normal range. I do have a mild hearing loss in the high-tone area, more so with my right ear. So the “normal” thing is a relief. That means that I shouldn’t have to have my ears checked for a few more years.

We did talk earlier about whether or not I had been exposed to loud noises or had long-term exposure to noise. Either of those things can affect your hearing, Johnston said. A sound such as a loud fireworks device exploding near you could cause a

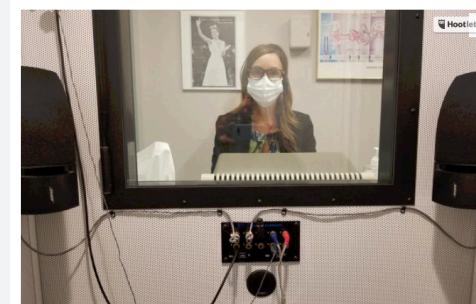
hearing problem. Long exposure to a hair dryer running, such as a hairdresser might experience, is another way a person could lose some of his or her hearing. Sudden hearing loss can also be caused by a medical condition. If that happens and you get a hearing test, Johnston said that she would likely refer you back to your doctor; or an ear, nose and throat specialist. My experience with loud noise was my many years in band in school, a handful of concerts including the Trans Siberian Orchestra and the fireworks displays.

Even though I was in the normal range, we went onto the next test just so I would know what happens if you have more than normal hearing loss. The bone conductor test is used to verify the findings of the sound test. It also sends tones, but they go into your auditory canal through your bones. This is a good way to determine if there is a blockage beyond the eardrum. A third test, speech audiology, determines what is the lowest level of loudness you can hear and still understand what a person is saying. In this test, Johnston reads a series of statements and changes the volume levels. Again, that test is done only after the first test determines you have hearing loss.

If the loss is such that Johnston believes a hearing instrument will benefit the client, they will determine what type of instrument will work best for the type of hearing loss the person is experiencing. “We try to match what one needs,” she said. “Not every hearing instrument will fit every person.” Johnston said that over-the-counter aids are generally amplifiers that turn up the volume on all sound tones, not just the ones that you need.

She also talked about the cost. There is no charge for the hearing test and there are all levels, types and prices on hearing aids. “We find ways to work with people’s budgets to get them to hear better with whatever they have,” Johnston said. “We don’t want cost to be a deterrent to people.”

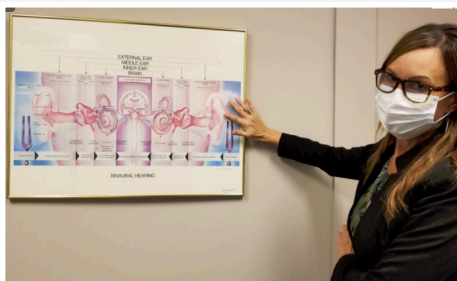
She noted that hearing aids would not restore your hearing. “They are computers,” Johnston said. “But they will help.”



My view of Hearing Specialist, Kristin Johnston from inside the sound booth.



Becky Vargo raises her hand to signal that she heard a tone when being tested by hearing specialist, Kristin Johnston.



Kristin Johnston explains the different parts of the ear.



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