

Renew your membership to our local chapter for only \$15 a year! 3 ways to renew: send your renewal with your name, address, phone number, and e-mail to: East Bay Chapter, HLAA, P.O. Box 12484, Oakland, CA 94604-12484. See back page to sign up and support

September 2020

East Bay Chapter

September 12, 2020, Meeting by Zoom! Zoom in and see your friends from HLAA-EBC. Our speaker will be Sgt. Darin Tsujimoto, from the City of Alameda Police Department. Sgt. Tsujimoto, who had multiple experiences with deaf and hard of hearing people as a paramedic in Southern California and San Francisco, joined the Alameda Police Department in 2011. He has had a diverse career while at the APD. He will speak about the training officers receive in communicating with deaf/HOH people as well as means that you can use to communicate with an officer if you are stopped.

National HLAA.

Our September 12 meeting will be a Zoom meeting: Everyone needs to register up front at our website: <u>http://www.hearinglosseb.org/</u>

After you register, you'll be sent information about how to join the meeting.

HLAA-EB will post to the California State Association webpage and our website. Check out our website: <u>http://www.hearinglosseb.org/</u> Contact us: <u>info@hearinglosseb.org</u>

MEETING NOTES: Understanding Hearing Loss: Signs, Causes & Treatments

At our Aug. 8, 2020 meeting, our guest speaker via Zoom was Dr. Anish Thakkar, Au.D., audiologist in private practice at the Hearing Zone in Oakland & Alameda, CA, although he is currently on hiatus from his audiology practice due to the COVID-19 pandemic. He presented an excellent review of the signs, causes & treatments or strategies for dealing with hearing loss (HL). Dr. Thakkar double majored in International Studies & Japanese at the University of North Carolina (UNC) at Chapel Hill and then earned his Doctorate in Audiology at UC San Diego. After completing his residency at the UNC Hearing & Communication Center and working abroad in Tokyo, Japan, he returned to California to join Hearing Zone, where until recently, he was conducting hearing evaluations, diagnosing HL



problems, and determining the need for and availability of appropriate hearing aids (H/A's) and/or assistive listening devices (ALD's) for his patients.

Stats on Who Has Hearing Loss (HL): 30-35% of adults age 65-75; 40-50% of adults age 75+ experience some level of HL. However, only 1 out of 4 individuals who could benefit from hearing aids (H/A's) actually use them.

Signs of Hearing Loss: Dr. Thakkar initially identified some of the usual signs or symptoms of hearing loss:

- * Friends & family stating you don't hear well
- * Difficulty hearing common sounds (phone, TV, doorbell)
- * Frequent need for repetition or clarification
- * Speech sounding "muffled" or unclear

Ear Anatomy & Types of Hearing Loss: He described the ear's anatomy, how it all works, & the different types of HL:

- Conductive (5%): Caused by obstruction of sound (e.g., tumor or earwax) as it travels through the outer/middle ear. In some cases, this type can be corrected by surgery or medicine.
- Sensorineural (95%): Caused by degeneration of cells in the inner ear (cochlea), a.k.a. "nerve deafness." Typically permanent & not medically treatable; usually treated with amplification (hearing aids).
- > *Mixed:* Combination of conductive & sensorineural hearing loss.

Hearing Loss Connections or Causes of Hearing Loss: Hearing loss has been connected to several wellness & health factors: 1) Falling or abuse that results in injuries; 2) Loud noise exposure; 3) Diabetes; 4) High fever/scarlet fever; 5) Ototoxicity from certain medicines; 6) Osteoporosis; 7) Cardiovascular disease; 8) Depression & social isolation; 9) Smoking; 10) Alzheimer's & dementia.

Research has demonstrated that we hear with our brains since auditory processing occurs mainly in the brain, not the ear. Studies have indicated that older adults generally have more difficulty hearing in noisy or complex environments, regardless of hearing status, but HL listeners do worse all the way around (Jin & Staden, 2014). In fact, the rate of cognitive decline has been shown to be heavily impacted by untreated HL.

Communication Strategies for Coping with Hearing Loss: Hearing loss can negatively affect communication: 1) Need for repetition; 2) Interruptions; 3) Long silences; 4) Misunderstandings; 5) Sudden topic changes; 6) Superficial conversation content; 7) Frustration; 8) Anger; 9) Blame; 10) Shame. Non-specific responses ("What?" "Huh?" or bluffing) are often not very effective.

However, there are several effective strategies which rely on the 4 parts of communication:

- ✓ The Speaker: 1) Speak slowly & loud enough, but don't yell; 2) Enunciate/speak clearly; 3) Make sure your mouth & face are visible; 4) Avoid speaking & chewing at the same time; 5) Don't speak from another room.
- ✓ The Message: 1) Repeat important keywords; 2) Rephrase; 3) Keep syntax simple; 4) Avoid pronouns be specific; 5) Use 2 shorter sentences instead of 1 long one.
- The Environment: 1) Limit any background noise; 2) Move to a well-lit area; 3) Get rid of distractions/multi-tasking; 4) Have good visibility of the speaker; 5) Stay close within 4-6 feet if possible.
- The Listener: 1) Use amplification (H/A's or ALD's); 2) Develop speech-reading abilities; 3) Increase concentration & lower anxiety levels; 4) Maintain a positive attitude; 5) Anticipate vocabulary or content.

Purchasing Hearing Aids (H/A's) & Assistive Listening Devices (ALD's): Do research in seeking HL assistance:

- Who is providing you service? (licensed audiologist/medical professional vs. hearing aid dealer/dispenser).
- Is the provider using best practices? (real-ear audibility verification; safe & effective programming).

- What are you paying for? (bundled vs. unbundled; service plan; provider's availability; warranty coverage).
- Are H/A's unlocked (as they should be), or locked (can only be serviced by the original provider)?

Summary: As Dr. Thakkar concluded his presentation, he summarized the following important points:

- Get your hearing tested regularly! Medicare covers comprehensive evaluation (but not hearing aids yet).
- Know that real hearing occurs in the brain, so be willing to invest in your brain by learning new skills.
- Assume the lead & inform others of your hearing difficulties, as well as your specific personal needs.
- Model good communication since communication is a two-way effort between the speaker & listener.
- Be patient, respectful and considerate of your communication partners, while keeping a sense of humor.
- Never say, "Never mind . . ." Instead, be a self-advocate & develop an assertive communication style.
- Don't procrastinate. Take timely action -- maintain healthy ears & protect your hearing via safe practices.

Resources for Living with Hearing Loss: Dr. Thakkar identified several useful resources to assist those with HL:

- Digital Hearing Aids & Their Components: Microphone; amplifier; computer chip; receiver; power supply.
- Omnidirectional vs. Directional Microphones: Change between modes automatically or pressing a button.
- *Hearing Aid Batteries:* Zinc Air batteries; Mercury Free batteries; Rechargeable batteries.
- Items for Properly Maintaining Your H/A's: Dry and Store; Dry Aid Kit; H/A's maintenance schedule.
- Assistive Listening Devices (ALD's): Used alone or in conjunction with H/A's to enhance auditory signals.
- *Captioning:* Decodes soundtrack of TV or internet programs into text; transcribes speech, music, applause.
- *Captioning for Movie Theatres:* Input your location & search to generate theatres with captioning.
- Alerting Systems: Detect environmental events at home or office by visual, auditory or kinesthetic alerts.
- *Bluetooth Connectivity:* Devices connect wirelessly through short-range, personal area networks.
- Bluetooth Streamer: Receives Bluetooth signals & directly transmits them to H/A's; acts as remote control.
- Hearing Aids & iPhone: Communicate directly to iPhone w/o an intermediary (Android users need a chip).
- Telecoil/T-coil: A tiny coil of wire that induces an electric current when in the presence of a magnetic field.
- Induction Loop Systems: Sound picked up by microphone & amplified by a wire around a room's perimeter.

For More Information & Questions: Email anishvthakkar@gmail.com; call (704) 787-1109.

From Sunnybrook Research Institute in Toronto, Canada, comes the first test of its kind to detect hearing loss using a simple blood test.

The research has been published in <u>Biosensors and Bioelectronics</u>. "Over 600 million people have hearing loss worldwide. In 20 years, as the population ages, that number is likely to increase to 1 billion," says <u>Dr. Alain Dabdoub</u>, co-author of the study, senior scientist and research director of the Sonja N. Koerner Hearing Regeneration Laboratory at Sunnybrook Research Institute.

"Current approaches for detecting hearing disorders are mostly based on physical examinations and cannot provide information about the exact location of the cellular damage within the inner ear. There is a need for a new more precise method to identify sites of damage."

In their pre-clinical research, Dr. Dabdoub and Dr. Sahar Mahshid, research associate, have designed a biosensor test to detect otolin-1 and prestin, two unique proteins which can be found circulating in blood and are linked to balance and hearing disorders respectively. The test, which is patent pending, is comparable to a glucose monitor and requires only a drop of blood. "Within 10 minutes, we're able to detect if these proteins are in the blood sample, says Dr. Mahshid. "The test, which relies on antibodies to detect the proteins, can be easily adapted to identify other blood-circulating proteins down the line."

Dr. Mahshid cautions that the research is still in the pre-clinical stage, adding that more work is needed to improve the test before it can be used at point-of-care. "At this time, the test is able to detect the proteins in low concentrations, but still higher than what you would typically see in a patient's blood. Our goal is to enhance our detection sensitivity, while also exploring more blood-circulating proteins reporting on hearing and balance disorders." The researchers note the test holds great promise for point-of-care diagnostics and will eventually allow for more precise treatments. "Being able to localize cellular damage will enable us to better personalize treatment," says Dr. Dabdoub. "This will eventually lead to improved quality of life for patients living with hearing and balance disorders."

HEARING AID BATTERIES! Only 17 cents apiece at Costco.

HLAA members can join the hearOclub to have batteries delivered to your home! Use the coupon code **HLAAmember** online at <u>hearoclub.com</u> or by calling 833.LISTEN-2 (833.547.8362).

DONATE USED HEARING AIDS and/or HEARING EQUIPMENT! See Dale Davis at a meeting or <u>ddavis94605@gmail.com</u>.

East Bay Leadership Team

The chapter is run by a Steering Committee, Leader Dale Davis, <u>ddavis94605@gmail.com</u> who also oversees the Membership Database.

Advocacy: Gerald Niesar, gniesar@nvlawllp.com

Outreach, Walk4Hearing Chair, National Chapter Coordinator/Liaison: Susan Jeffries Fitzgerald, <u>susanlj29@gmail.com</u> Treasurer: Len Bridges, <u>lenbridges3993-hlaa@outlook.com</u>

Programs: George and Susan Fitzgerald, revcgf@gmail.com

Technology and AfterWords Small Group: George Chin, Sr., 352-1569, georgechinsr@gmail.com

Membership: Connie Gee, <u>cbgee2014@yahoo.com</u>; Derek Daniels, <u>d.c.daniels262@gmail.com</u>; and Marlene Muir, <u>muircmc@comcast.net</u>

Newsletter Editors: Nancy Asmundson, <u>nasmundson@comcast.net</u>; Kathy Fairbanks, <u>mkathyfairbanks@att.net</u> Publicity: Kay Athos, <u>kayathos98@aol.com</u>, and George Chin, Sr., <u>georgechinsr@gmail.com</u> Refreshments: Marie Rhein, Coordinator

Technical/Audio Loop: Peter G. Townsend, peterg.townsend@gmail.com, Steven Ulrich

JOIN THE NATIONAL HEARING LOSS ASSOCIATION – THEY ARE ADVOCATING FOR YOU! Go to this URL to join today: <u>https://www.hearingloss.org/make-an-impact/become-a-memberrenew/</u>