# Hearing loss and increased risk of falling

Brady Workman, HearingHealthMatters.org February 28, 2024

Falls are the leading cause of injury related death in adults 65 or older. In the United States, around \$50 billion is spent annually on medical care related to falls in older adults. Data from the World Health Organization estimates that more than 680,000 people die and 172 million suffer from falls related disabilities annually worldwide.

Hearing loss is also prevalent, with an estimated 15% of American adults noting difficulties hearing. The risk of hearing loss increases with age and it is estimated that in 2025 there will be more than 500 million older individuals with significant age related hearing impairment worldwide.

Both hearing loss and falls are huge societal problems that need to be addressed.

### **Hearing loss and falls**

In recent years, there have been a number of worrisome associations with hearing loss including: increased odds of cognitive decline, social isolation, depression, poorer physical function, mortality, and greater risk of falling. A recent meta-analysis showed a 69% increased odds of falling in individuals with hearing loss.

### **Chapter Calendar**

### April 11 at 4:00

Chapter social meeting at Hof's Hut

### **April 24 at Noon**

Board meeting on Zoom

June 8 DONATE HERE

Long Beach Walk4Hearing

June 26-29 REGISTER HERE

**HLAA National Convention in Phoenix AZ** 

**Lip reading practice:** Wednesdays, 9:30-11:30 a.m. at Weingart Center

# April 11 Monthly social meeting

Join us at the Los Altos Hof's Hut. We've reserved space on the patio, away from street noise.

Bring your news, questions, or concerns about hearing loss, or just come to eat and visit. We hope to see you!

4:00 pm, Thursday, April 11 Hof's Hut, 2147 Bellflower Blvd., LB

Free parking in the lot behind the restaurant

Older adults with hearing loss have also been shown to be more than twice as likely to fall as their normal hearing peers. The risk of falling appears to increase further with greater degrees of hearing loss.

This association has been shown to be independent of concomitant vestibular disease and other demographic features such as age and sex. Individuals with hearing loss may even show differing postural control strategies based on bilateral versus unilateral hearing loss.

Potential mechanisms behind this association could include reduced environmental awareness due to the hearing loss, or it may be related to cognitive load. An individual has only a finite number of cognitive resources to devote to all activities and thought processes, including hearing and environmental awareness.

We could speculate that someone with hearing loss must devote more cognitive resources toward environmental awareness, leaving less resources for spatial awareness. With less resources directed toward spatial awareness, the odds of tripping or stumbling would likely increase.

There is clearly an established association between hearing loss and increased falls risk; however, the pathophysiology behind this



## PRESIDENT'S MESSAGE

from Gail Morrison

My journey with hearing loss continues...

After graduating, I followed to California a young man I'd met as students from Michigan State University. Despite my mother wanting a December wedding, it turns out we weren't suited. I worked at Douglas Aircraft in the Engineering Department as a typist and sang in my Santa Monica Presbyterian Church choir. There I met a handsome baritone in the choir. We married, had three beautiful children. and I was active in the community, landing a chit-chat society column called "Exclusively Brea by Gail Oestreich!" in a local newspaper. All of this even with my hearing loss. As it turns out, my husband and I eventually divorced. I went back to office work and moved to our little beach house in Belmont Shore. Little did I know that things were to turn around, for the good!

As fate would have it, Al Morrison lived across the street. My son organized a New Year's Eve party, invited the neighbors and Al attended. Al was a mechanical engineer at Lockheed with 70 patents with Lockheed. He liked gadgets. Al picked up the pieces of my life and my hearing loss, installing flashing lights on our telephone to let me know the phone was ringing, which I couldn't hear. But every Fall, I had dreams of being back in college, except my children were there, even my former roommate, Pearl! Al said, "Well, why don't you go? "I said, "Are you crazy? I won't be able to hear anything!" But AI said, "How do you know...without trying?" With Al's encouragement, I returned, sure that I wouldn't hear and would eventually fail. But I graduated in 1998, and earned my MA in English from CSULB. And all of this without hearing aids!

My office job went away with trumped up causes of not being able to hear to take meeting notes. So I turned to CSULB who directed me to the Department of Rehabilitation for help in finding

a job. Their first step was directing me to my first pair of hearing aids and I'll never forget my first experience. I was outside, sitting on our bench when, suddenly, I heard a strange whirling sound. As I turned around, there in the air, a little hummingbird was busy, her little wings moving so rapidly; but I heard this sound! I was stunned! I don't know who was more surprised, her or me. How many times had she come there and I didn't move?

The second step led me to Disabled Resources Center, Inc. where I became the Administrative Assistant to the Executive Director – the best job I ever had. I held this position until 2003 when they ran out of funding. Fortunately, by then, I qualified for Social Security.

At the same time, I joined American Association of University Women in 2001 and met another person with hearing loss. She picked me up and took me to Hearing Loss Association of America (HLAA) Long Beach/Lakewood Chapter where I entered a room of 50 or more people just like me! I couldn't believe it. Here were many professional people: teachers, professors, engineers, an attorney! I'd always been around intelligent people! Attending HLAA conventions, I learned about the hearing induction loop used by activating the T-Coil button on my hearing aids; I could hear! Every workshop room was installed with the loop, including the huge convention room and I could hear everything! Everything!! A miracle!

And so, this story has a happy ending. What a journey! But the journey continues all because of a wonderful man that encouraged me and then one friend who took me to a meeting.... and as the cliché goes....the rest is history.

I'm still learning about hearing loss, my own hearing loss and that of others. Through my membership with HLAA, I continue to learn about hearing loss and now am an advocate to help reach others and inspire the confidence that we all need to be happy and to HEAR!

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### an excerpt from:

## A guide to paying for hearing aids

Carly Sygrove, HearingTracker.com March 26, 2024

### Why do hearing aids cost so much?

According to a HearingTracker reader survey the average price of a pair of prescription hearing aids is \$4,672. With modern hearing aids having a lifespan of 3-7 years, when purchasing hearing aids, you also need to take into account the "hidden" costs of hearing aid upkeep. The costs of buying hearing aid batteries (if your device is not rechargeable), staying on top of hearing aid cleaning and maintenance, tunings, accessories, and repairs all add up, and there's no hiding the fact that hearing aids are expensive.

## Various factors contribute to the cost of hearing aids, including:

**R & D expenditure.** Manufacturers spend millions of dollars on research and development each year to create hearing aids that are smaller, more powerful, and perform better.

**Lower sales volumes.** Hearing aids have far fewer sales than consumer electronics such as smartphones and consumer audio products. For example, in 2022, there were about 1.39 billion smartphones sold compared to about 20 million hearing aids sold globally (a ratio of about 70 to 1).

**Trial periods and returns**. The FDA classifies hearing aids as medical devices, so in most cases, manufacturers cannot resell returned devices or reuse their parts. Historically, about 15-20% of prescription hearing aids are returned for credit (due to poor fit, insufficient volume/gain, opting for a different device, etc.), with even higher percentages for OTC aids, and this substantially increases costs.

**Professional services.** By far, the largest price markup in hearing aids comes from hearing providers, who, like dentists and other health-related professions, need to pay for the advanced testing/fitting equipment, salaries of professional and support personnel, overhead, marketing, etc., to keep their doors open.

Hearing clinics often bundle device costs with professional care, covering exams, fitting, maintenance, and future appointments all in one payment. Traditionally, the markup has been 2 to 3 times the wholesale cost of the devices. Some clinics unbundle costs, allowing separate payments for hearing aids, fitting, and follow-up care, offering more transparency. Both billing methods have their pros and cons. Ultimately, the decision to choose bundled or un-bundled care comes down to your personal needs, preferences, and budget.

The good news is that, for at least a decade, hearing aid prices have been trending downward by 1-2% per year when adjusted for inflation. It's still unclear if OTC hearing aids will have any effect on prescriptive hearing aid prices.

#### Read the complete article here

The full article explains numerous options for paying for hearing aids, including financing, private insurance, the VA and government programs, charity assistance, and strategies for reducing costs.

Included are lots of tips and links for everything you need to know to navigate the financial aspects of paying for hearing aids with confidence and ease.



### Long Beach Sunday, June 8 at Shoreline Park

## **Maxine's Marchers**

It's Walk time again! Please support team "Maxine's Marchers" – 40% of your donation comes back to our chapter!

It's easy to **donate online!** (Designate Maxine's Marchers as your team.)

Or donate by check. Make it out to Walk4Hearing and mail to: HLAA Long Beach/Lakewood

P.O. Box 41

Lakewood CA 90714

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## The big talk: Juliëtte does TEDx

Gael Hannan, HearingHealthMatters.org March 12, 2024

From the moment I met Juliëtte Sterkens, I have been inspired by her passion in helping people hear better, especially through the game-changing technology of telecoils and hearing loops.

Juliëtte is Dutch and she speaks English with the clarity and precision that most native speakers lack – and which people with hearing loss need. She started preaching the benefits of telecoil-equipped hearing aids when she was still in private audiology practice. She had heard David Myers, a renowned psychologist and author, speak on the subject and knew that his message was something that would greatly benefit not only her own patients, but all people with hearing loss.

She and her engineer-husband Max, who resigned from the corporate world to become a loop installer and later joined Juliëtte in her North American advocacy work, "jumped on their tandem that day" and committed themselves to telecoil and hearing loop technology. Their first loop went into a church in the early spring of 2009, and it was life-changing for at least one person on that first Sunday. (More about Russ later.) The rest is history.

Juliëtte thrives on interaction with audience members in the hundreds of presentations she has given around the world over the past 15 years. But the opportunity to do a TEDxOshkosh talk was a game changer. This was the Big One, an opportunity to spread the message to a huge and ever-expanding audience. However, the experience of delivering the actual presentation was unlike anything she had done, involving months of training and practice sessions.

Juliëtte describes it:

"You're standing alone on the stage. There's no ad-libbing. You cannot see the audience and there is little interaction possible. You are talking into a void. With a strict timer going. Very nerve-racking."

And then it was done. Juliëtte's TEDxOshkosh talk went online on March 2 and, at the time of writing, it has been viewed nearly 150,000 times. (You can watch it here).

Juliëtte's message is not limited to hearing loops, as evidenced in her talk. Her goal is to inform the general public about hearing loss, about the limitations of hearing aids, but also to stress that there are effective workarounds for better hearing. Consumers can ask for telecoils, as well as Bluetooth technology, when they speak with their hearing healthcare provider. In doing this TEDxOshkosh talk, Juliette helps to raise awareness that people with hearing loss deserve hearing accommodations, in the same way that accessibility has become standard for people who use wheelchairs or people with low vision.

And Russ? He's the man Juliëtte talks about and his daughter wrote Juliëtte after the TEDxOshkosh talk went online: "[When the loop had been installed in the church], it was the first time my dad could actually hear the pastor! Then I had a hearing loop installed in his house so that he could hear the television. What a blessing!"

Juliëtte Sterkens, AuD has received international recognition for having fostered hundreds of hearing loop installations and changing the lives of thousands of people with hearing loss. She is a compassionate expert who cares about the well-being of people with hearing loss. I continue to learn from her and I'm proud to call her a friend.

Watch her TEDxOshkosh talk and think about it. Then, share it.

https://hearinghealthmatters.org/better-hearing-consumer/2024/a-big-hearing-loss-moment-juliette-doestedx/

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### Hearing loss: emotional fire-starters

Gael Hannan, HearingHealthMatters.org February 27, 2024

What sparks your emotions in day-to-day life with hearing loss? What sets you off?

If you're like me, you have a long list of emotional fire-starters. In fact, mine's so long that I've grouped it into three main sources.

For most of us, by the time we receive a definitive diagnosis of hearing loss, we have already experienced many of its hallmark negative emotions. Frustration, anger, grief, worry, sadness, isolation and loneliness. (A very few people embrace their diagnosis with joy, such as comedian Kathy Buckley who grew up in the belief she was not intelligent and was therefore lesser than other people. Then came the life-changing discovery that she was deaf.)

What causes our negative emotions? For me, it's a three-way tie of emotion categories.

Its life imprint! Hearing loss impacts our overall life. It seriously affects our communication, which is the glue that connects us to other people and our lifestyle. Because of the age-old stigma, we worry that people will think less of us. Our self-esteem may take a beating. And having hearing loss means changes to how we do things! We must change communication processes in our work and in our relationships. Group conversations, social events, and even watching to involve making permanent changes so that we can participate and understand.

How other people deal with it! Because other people, even those closest to us, do not have hearing loss, they find it difficult to deeply understand ours, and that is understandable. They can't always predict or identify when we're struggling. They find it next to impossible to remember basic communication necessities from one conversation to the next. So we tell them, over and over again. Also, it's just plain annoying when people who have good hearing, don't appreciate the gift of it.

**Me! I frustrate myself!** Not only must we repeatedly express our needs to other people, we must also remind ourselves! We should

know this stuff! Some examples:

- When I'm not following a conversation, I strain to hear, pushing my ear muscles to perform a miracle. This, of course, never works because our ears don't have those kinds of muscles! Our pets can waggle their ears, but the human pinnae (those side-of-the-head earflaps) do not bend, stretch or extend at the command of our brain. Still, I sense an inner stretching to connect.
- We ask people to repeat themselves two or three times. Asking for more than one repeat of the same phrase, without giving instructions to rephrase or speak up, fits the description of 'insanity': doing the same thing over and over and expecting a different result.
- And then, not having explained our needs, we retreat into bluffing, an emotional powder keg. Pretending that we understand when we wouldn't be able repeat back what was said, or even identify the topic being discussed is the biggest source of self-frustration in the hearing loss book! Although I am a passionate anti-bluffing crusader, it's human nature to bluff when the hearing gets hard. And I am very good at it. I can make you think you are the most interesting person in the world and that I'm following your every word. But where does this bluffing get me? Nowhere.
- Hearing envy can eat you up. But, just sometimes, mildly, I do envy the ability of other people to hear. I envy people who can tell where a sound is coming from, every single time. But most of all, I envy anyone who doesn't have tinnitus.
- Etc., etc., etc.

The good news is that in all the above 'emotional categories' exists the potential for change, for improvement of our hearing loss journey. When we grow in our knowledge and experience, we learn to handle the emotional challenges. This year's theme of World Hearing Day is 'changing mindsets'. When we do that, life gets easier and communication gets better.

https://hearinghealthmatters.org/better-hearing-consumer/2024/hearing-loss-emotional-fire-starters/

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#### hearing loss and falling

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association is still not fully understood. It is also worth noting that association does not prove causation, particularly at an individual level.

This relationship needs to be further studied to better understand it.

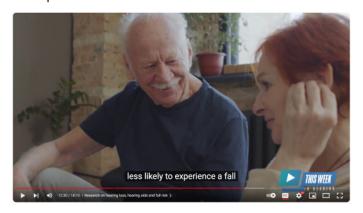
Most age-related hearing loss is sensorineural, meaning it is related to degeneration of the inner ear cochlea or the vestibulocochlear nerve. At this time, sensorineural hearing loss cannot be medically corrected and amplification, most commonly through hearing aids, is the current means to treat this type of hearing loss. It is well established that appropriately fit hearing aids do help with communication and may even slow the rate of cognitive decline in elderly individuals.

### Can hearing aids help?

It appears amplification in the form of hearing aids may also be helpful in reducing falls risk. Hearing aids have been shown to aid in static balance function in elderly individuals with hearing loss. One study showed elderly hearing aid users were able to maintain balance on a compliant surface twice as long when they used their hearing aids. Another study showed individuals with untreated hearing loss were more than twice as likely to fall than their peers who wore hearing aids, suggesting a protective effect from hearing aid use. It is worth noting that the above cited literature includes individual studies and higher levels of evidence would

provide more convincing evidence as to the efficacy of hearing aids in reducing falls risk.

Despite the sparse data, it is at least promising that hearing aids/amplification may be useful in reducing the risk of falls in an elderly population. Further research in this area is indicated to better determine the utility of amplification in falls prevention.



Readers may find the August 2023 interview with Dr. Laura Campos, a clinical audiologist at the University of Colorado, intriguing. In this interview, she explores her research, which delves into the question of whether the use of hearing aids can help reduce the risk of falls: <a href="https://www.youtube.com/">https://www.youtube.com/</a> watch?v=A1nEztCqu94

https://hearinghealthmatters.org/dizziness-depot/2024/hearing-loss-and-increased-risk-of-falling/





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