

REPORT OF VMC PPG EVENT

Topic: HEARING LOSS

Causes, symptoms, treatments, hearing aids

Time and Place: 6.00 19 January 2017, Group Room VMC

Speakers:

Julie Wilkins (JW), Clinical scientist, Manager of Audiology Services, Charing Cross Hospital

Richard France (RF), from Action on Hearing Loss (trading name of The Royal National Institute for Deaf People)

Julie Wilkins opened the meeting with the surprising statistic that there are over 10 million people in the UK suffering from hearing loss (1 in 6). More people have hearing loss than have cancer, yet it is a Cinderella service when it comes to investment. Nevertheless, it was encouraging to hear that NHS audiology is significantly more efficient than elsewhere in the world, and that the future lies in smartphone compatible self-programming aids and stem cell research. NHS audiology services involve screening (neo-natal, at school and industrial), paediatric diagnostics, adult diagnostics (hearing and balance), adult rehabilitation, hearing therapy, cochlear implants and other implantable devices.

Using diagrams of the ear, we were told that hearing loss to the outer-, middle-, inner-ear and auditory nerve is usually labelled as mild, moderate, moderate to severe, severe or profound. In the latter case surgery can offer a cochlear hearing implant. Causes include hearing loss at birth, viral, certain drugs, medical conditions (eg otosclerosis, Ménière's disease), noise exposure, ear infections, wax build up, accidents, injuries and age. JW later added that stress can also cause temporary hearing loss, and serious damage can be done by poking about in the ears. No-one should use Q-tips or anything small to clean out their ears.

Audiologists have to consider many factors when recommending hearing aids: from the power of hearing, the type of mould, the controls, either one or two needed, programming of the hearing aid, tinnitus, compatibility of assistance devices, to patients' expectations and advice on communication tactics.

Hearing aids are all about amplification. JW gave us her top tips for wearing hearing aids. Most importantly, wear them all day, every day in order to get used to them, and make sure you insert them correctly.

Additional useful accessories include noise reduction plugs, musicians' ear plugs, white noise generators and wireless accessories, while home visits from volunteers, patient forums, communication classes and lip reading abilities are all helpful.

Richard France then spoke on behalf of Action on Hearing Loss. RF has been profoundly deaf from birth and was assisted by a sign language interpreter. He first described danger levels above 80 decibels that can permanently damage your hearing such being close to a jet plane taking off, heavy gun and artillery fire, or a pneumatic drill. But noisy rock concerts, night clubs, and listening to a music player on headphones at high volume can also do long-term damage in just a few hours.

Remember that you risk more than your hearing. You lose your friends, family and social life. You lose confidence, double your risk of depression because of isolation, and face loss of earnings – because 8 out of 10 employer attitudes are a significant barrier to employment. Many people with hearing loss have problems coping in public places because people are impatient with them, and even communication at GP surgeries can be a barrier to getting an appointment. He urged the audience to speak to directly to a deaf person, with patience, without shouting and without looking away or covering the mouth, to enable them to lip read.

The national charity Action on Hearing Loss has three important missions:

1. to support deaf people and make sure they have the right to care, support and information
2. to undertake biomedical research
3. to provide a national voice by campaigning for equality and life choices.

Their major campaigns include: Access to TV, more NHS hearing aid services, lip-reading classes, and calling for a hearing screening programme for the over 65s.

As well as fundraising and campaigning, Action for Hearing Loss also has a number of services:

- Information line
- Tinnitus helpline
- Outreach information line
- Home visits
- RNID library
- Website – actiononhearingloss.org.uk
- Leaflets, fact sheets and publications – available via the website
- 'Hear to Help' working with local audiology services

Their headquarters is at 19–23 Featherstone Street, Islington, EC1Y 8SL (nearest tube Old Street), where you can make an appointment to get advice and try out equipment and accessories (see also their website) – but not hearing aids.

Opening times

Tuesdays 10 am – 12 noon, Thursdays 2 pm – 4 pm.

Telephone 020 7296 8000

Textphone 020 7296 8001

e-mail: ResourceRoom.London@hearingloss.org.uk

A lively question and answer session followed, including these topics.

Q. Is there any advantage in getting a hearing aid from a private supplier?

A. (response from both speakers) NHS hearing aids are excellent, although some privately sourced can be more sophisticated. Do try the NHS first because you will get the most professional care in making sure you are prescribed the right one for your condition.

Q. What is the cause of Tinnitus?

A. Tinnitus causes buzzing, ringing, whistling and a whole range of sounds in the ear. It affects people of all ages and is caused by various conditions. 1 in 10 people suffer from it at some time, and for many it is not a sign of a serious underlying condition, but if you continually suffer from noises in your ears and it does not get better you should see your GP.

Q. How can I offer to volunteer?

A. Go to the Action on Hearing Loss website to find out more about fundraising and volunteering. actiononhearingloss.org.uk

There were 35 attendees and the meeting closed at 7.45.