

## Condition:



# Hearing Loss

## Covered in this fact sheet

What is hearing loss?	1
Hearing loss and work	2
Top tips to help manage your hearing loss in the workplace	2
What causes hearing loss?	3
What are the symptoms of hearing loss?	3
Talking to your GP or another healthcare provider about your hearing loss	4
Treatments for hearing loss	4
Some techniques to prevent / manage hearing loss	6
Useful links and helplines	7

## What is hearing loss?

Hearing loss is very common and is caused by noise, ageing, disease and heredity. It is a partial or total inability to hear.

There are different types of hearing loss:

- **Sensorineural** hearing loss is due to problems of the inner ear, also known as nerve related hearing loss.
- **Conductive** hearing loss occurs when there is a problem conducting sound waves anywhere along the route through outer ear, eardrum or middle ear.
- **Mixed** hearing loss is a combination of conductive and sensorineural hearing loss. There may be damage to the outer, middle or inner ear.

**Approximately 1 in 3 people aged, between, 65-74 have hearing loss.**

**Hearing problems that are ignored can worsen.**

## Reference



Click here to watch a video on the '3 Different Types of Hearing Loss' **Video (link opens in new window)**

## Hearing loss and work

Hearing loss is an increasingly problematic issue, particularly in the workplace. There are many workplace environments that are challenging for people with hearing loss, such as loud and chaotic settings, which makes work very difficult. You should talk to your employer about reasonable adjustments that can help make work less complicated and thereby less stressful.

When hearing loss is addressed properly, it has a positive impact on everyone in the workplace, with improved efficiency and communication between you and your colleagues.

## Top tips to help manage your hearing loss in the workplace

Here are some tips to help you manage hearing loss at work:

- **Encourage your colleagues to speak clearly and to face you.** Speaking louder and slower does not always help, although that is a common means of communication.
- **Encourage colleagues to help with personal adjustments** such as reducing background noise, like personal music or loud conversations.
- **Consider hearing aids** to help manage at work.
- **Talk to your employer** regarding reasonable adjustments at work, such as staff guidelines and some education on hearing loss.

## What are the causes of hearing loss?

There are a variety of causes of hearing loss. Some possible causes are:

- Earwax
- Ear infection
- Perforated (burst) eardrum
- Meniere's Disease
- Damage from a loud noise or certain medicines that affect hearing
- Glue ear (fluid)
- Otosclerosis (abnormal bony growth)
- Cholesteatoma (abnormal build-up of skin cells)

## What are the symptoms of hearing loss?

Symptoms usually come on gradually but sometimes it can come on suddenly. There may be earache and unusual noises in the ear, such as tinnitus or a spinning sensation.

### Early signs of hearing loss are:

- Difficulty hearing other people clearly, especially in noisy environments.
- Asking people to repeat themselves.
- Having the volume louder than other people need it.
- Difficulty hearing on the phone.
- Finding it hard to keep up with a conversation and feeling tired with the effort it involves.

### Signs of hearing loss in one ear

- No reply when being called.
- TV volume is turned up very high.
- Talking loudly.
- Not speaking clearly.

## Talking to your GP or another healthcare provider about your hearing loss

If you suspect you have hearing loss the first port of call is to your GP, who can then refer you on to an audiologist if needed. The GP can test for temporary causes, such as ear infections. They will ask about symptoms, look in your ears and possibly carry out some simple tests. Further tests are likely to be carried out if there is no obvious cause.

Action on Hearing Loss advises that if you have any difficulty getting a referral to an audiologist from your GP, you should ask for a second opinion.

There is the **Any Qualified Provider (AQP)** scheme in England, which means that private hearing care providers can deliver NHS adult audiology services, as long as you meet set requirements.

There is a possibility that there can be a choice of service if AQP is within the local area.

## Treatments for hearing loss

### Hearing aids

There are different types available on the NHS or privately. The most common type is behind the ear aids that go around the top and back of your ear. There are also aids that fit in the opening of the ear and also very small aids that fit a bit further into the opening of the ear, known as canal hearing aids. The GP can refer you to a specialist, who can then decide whether you will need a hearing aid.

### Implants

Before having a cochlear implant, you will have an assessment to find out if it will help. It will only help if the nerve that sends sound to the brain works properly.

These are devices that are attached to your skull or placed deep inside your ear. This is for those who are not helped by hearing aids. The most common types include bone anchored hearing aids and middle ear implants.

- **Bone anchored hearing aids** are for when sound is unable to reach the inner ear. It can be clipped on and off whenever needed and some newer types are held onto the head with magnets instead of a connector.
- **Cochlear implants.** These are an option if you have severe and permanent hearing loss that is not helped by hearing aids. They work by turning sound into electrical signals and sending them to part of the inner ear called the cochlea. It has two main parts- a microphone behind the ear that picks up sound and changes it into electrical signals, which are sent along a wire device to the skin, and a device placed inside the skull that picks up electrical signals from the device on the skin and sends them along the wire to the cochlea.
- **Auditory brainstem implants.** This is an option if you have severe, permanent hearing loss and a problem with the auditory nerve. An ABI works in a similar way to a cochlear implant, but the electrical sound signals are sent directly to the brain along wires, instead of the cochlea. It will not restore your hearing but can improve it to an extent.
- **Middle ear implants.** This is an option if you cannot use a regular hearing aid. It has two main parts- a device attached to the skin that picks up sound and turns it into an electrical signal, and a device under the skin that picks up the signals and sends them along a wire to the small hearing bones deep in the ear, which then causes them to vibrate.

## Sign language/ lip reading

Sign language is a visual way of communicating using hand gestures and body language and facial expression. There is also Sign Supported English (SSE), which is a variation of BSL. It also uses BSL signs but the structure and grammar are based on spoken English. It is often used in schools where deaf children are taught alongside hearing children.

## Preventing hearing loss

- Keep volume down when watching TV or listening to the radio.
- Avoid loud headphones that blot out outside noise.
- Use ear protection at loud concerts and in other noisy environments.
- Avoid cotton buds.

## Self-management



### Take Notice

Learn to relax – stress can sometimes worsen tinnitus, so knowing how to reduce your stress levels can help you to manage tinnitus.

## Useful links

### Reference



Click here to visit [www.actiononhearingloss.org.uk](http://www.actiononhearingloss.org.uk)  
**Website (link opens in new window)**

### Reference



Click here to visit the NHS for hearing loss treatments  
**Website (link opens in new window)**

### Reference



Click here to visit the NHS for hearing loss symptoms  
**Website (link opens in new window)**

### Reference



Click here to read 'Hearing Loss: A Common Problem for Older Adults'  
**Website (link opens in new window)**

### Reference



Click here to read about hearing loss and the workplace  
**Website (link opens in new window)**

## Summary

Hearing loss has many causes and will worsen if left untreated. If you have hearing problems you should see your GP for further tests to determine the extent of the hearing impairment.