

Guest Speaker – Kate Johnson accompanied by **Julie Sutcliffe** **Subject – “Hearing Loss and Technology”**.

(Note: If your scribe appeared extremely attentive to these two delightful young ladies, it was not to indulge his optic senses but more so his aural sensitivities. Having had both stapes bones replaced with artificial implants some years ago, recent deterioration in hearing resulted in today’s meeting being his initiation into wearing a hearing aid. So is this summary a fabrication or did he actually hear?)

As indicated by Howard Walker in his introduction, Both Kate and Julie are qualified audiologists employed by Australian Hearing, the Commonwealth Government owned service available mainly to concession card holders, children under 21 and indigenous people over 50. However the presentation covered hearing problem issues that may apply to us all, whether solutions are government or privately funded.

Kate explained how our ears are complex organs, comprised of 4 segments within 2 groupings. The conductive pathway comprises the outer and middle ear, and the neural nerve pathway comprises the inner ear and auditory nerve. Sound makes the eardrum vibrate, which causes the bones to vibrate which in turn causes the fluid to move and hair cells to bond, which then causes the auditory nerve to take messages to the brain. There are 3 different types of hearing loss – **conductive** caused by blockages (wax etc.), infection, perforated drum, otosclerosis (bone growth) and ear canal closure; **sensorineural** – damage to or malfunction of the cochlea or nerve resulting from ageing process, excessive noise, diseases (eg: meningitis and Meniere’s), viruses (eg: mumps, measles), drugs and head injuries; and thirdly we can have a **mixture of both**.

It’s not just that we can’t hear. Depending upon the condition, there are a variety of consequences such as:

- Soft sounds can’t be heard
- Key parts of speech are missed
- Problem in separating sounds
- Range of hearing is reduced

Often the result is we can hear but can’t understand

It is also common that we find high pitch difficult to hear but low pitch ok.

The impact of this includes such things as strained relations, frustration, incorrect labelling (resulting in a perception of rudeness), and danger.

A simulation test for hearing loss includes use of the well worn “The quick brown fox.....” which discloses whether the loss is moderate, severe or profound.

Responding to an intermediate question session, Kate advised that we all have wax in our ears to discourage foreign intrusions and lubricate canal skin, but in some the build up can eventually block hearing. When visiting a GP it is worthwhile getting him to check for wax.

He can clear it, as too may a pharmacist. Don’t try yourself by using cottonbuds!

Loss of balance is due to a variety of causes and needs to be referred to your doctor.

Hearing Aids.

There are 3 main types of hearing aids:-

- **Custom** (in ear - larger and more powerful for more serious problems), **Behind ear** and **Open fit**.

Advances in technology include noise reduction, directional microphone, feedback management, and autophone.

Selecting the right aid takes account of listener’s needs, lifestyle, hearing loss, cosmetics, ear shape, and management needs. Aids are matched to a system based on years of research.

All hearing aids have certain basic functions in common such as increasing volume of sound and compensating for softer sounds. Long term benefits aim for improved health and self-esteem. They won’t allow you to hear as well as when you were young and can

initially have consequences such as annoyance from sounds you haven't heard for a long time.

There are a range of special listening devices such as wireless T/V amplification unit to increase sound uniquely for the user, also special telephones for hard of hearing, FM systems for meetings and groups, and loop systems for churches and meeting halls. Kate expressed concern re long term problems due to excessive noise levels of ipods and other music devices.

Regarding **Tinnitus** (a perception of buzzing/ringing noise in the head), this sensation is common and normal. For most people it reaches the sub conscious and is not apparent. However resulting from hearing loss or tiredness/stress it can become very annoyingly intrusive. Alleviation actions may include avoiding complete silence (playing music etc.), relaxation, hearing aids, learning more about it and finding triggers.

In his vote of thanks to the girls Jim Bryant humorously highlighted the very real potential for hearing loss to intrude on domestic bliss (*I'm sure I saw more than one in the audience join me in nodding agreement. Ed.*) We all heartily supported Jim in appreciation to Kate and Julie for a great presentation.

Note: This is another topic which may be of significant interest to many of our members and more detailed information can be found on the Australian Hearing web site

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