Better Hearing Guide

How to hear better for life.



Our hearing is a vital part of our ability to communicate with others. Hearing allows us to connect with friends and family, at school, work, and in the community. Hearing improves quality of life, mental health, and is one of the secrets to aging well. That's why we believe it's so important to protect and monitor our hearing. It is possible to *hear better for life*, and this guide will tell you how.

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Hearing is life

Hearing is wonderful. When we hear, our ears detect changes in air pressure that transform into nerve impulses which the brain perceives as sound. It's a science-based process that becomes laughter, birds singing, and music. We may be biased, but we think hearing is the best of the 5 senses!

Hearing connects us to people and our surroundings. Changes in hearing can also be related to other conditions such as heart disease, high blood pressure and diabetes. That's why ensuring your hearing is healthy is so important.

By caring for your hearing, it is possible to hear well for life. Here are 5 actions everyone should take:

- 1. Limit noise exposure
- 2. Wear hearing protection
- 3. Never place objects in your ear (no cotton buds!)
- **4.** Check medications (some are toxic to the nerves in the ear)
- 5. Have your hearing tested by a clinician



If you're over 50 and have never had a hearing test, or it has been more than 2 years since your last test, we recommend seeing an clinician. That way you have a baseline that changes in your hearing can be measured against.

If your hearing changes, it's important to take action as early as possible.

What is hearing loss?

The sensory cells in the inner ear, called hair cells, convert signals from sound into electrical impulses that the auditory nerve sends to the brain. Hearing loss occurs when the cells are damaged, or stop working, which impacts our ability to hear speech and other sounds.

Nearly 1 in 4 adult Canadians report having hearing loss¹. Although hearing loss can occur suddenly, most often it develops slowly over time. This delay makes changes in hearing hard to detect, especially for the person experiencing hearing loss (often family and friends will notice first. On average, it takes 7 years before hearing loss makes communication difficult enough to do something about it.

What causes hearing loss?

- Aging
- Exposure to noise
- · Certain kinds of medication
- Serious infection
- Head injury or accidents
- Other health conditions



With hearing, you need to "use it or lose it". If a person stops hearing certain sounds—for any reason—the auditory nerve and parts of the brain that process sound get out of practice. Early detection and treatment of hearing loss will allow a clinician to bring more of those lost sounds back into hearing range.

^{1.} Health Reports: Unperceived hearing loss among Canadians aged 40-79 (2019). Canadian Hearing Services. Statistics Canada. Retrieved from: https://www150.statcan.gc.ca/n1/daily-quotidien/190821/dq190821c-eng.htm

How hearing loss can affect daily life

In background noise

Difficulty hearing in background noise e.g. in a restaurant, at a gathering, with a radio playing.

Media

Listening to the television or radio at a louder volume than others.

television Voices

Difficulty hearing whispering, children and women's voices, or understanding accents.

Conversation

Having to ask others to repeat several times or explain what has been said.

Phone

Direction

Not hearing sounds from behind or when being

spoken to from another

room.

Unable to hear the other person speaking on a phone.

For many people, hearing may not be difficult in all situations. For example, a one-on-one conversation in a quiet room may be fine.

Below are common situations where people with hearing loss experience challenges:

It is very common for people to develop ways of coping with hearing loss that don't solve the problem.

- Withdrawal:
 - "I don't go out to noisy restaurants anymore because I know I won't be able to hear the conversation."
- Blaming others:
 - "You mumble. You speak too fast. You don't speak clearly."
- Pretending:
 - "I nod like I'm hearing as I'm trying to figure out what the person just said."
- Visual cues:
 - "If I watch the speaker's lips or face it's easier to understand what I'm hearing."



Do any of the challenging hearing situations or coping routines sound familiar?

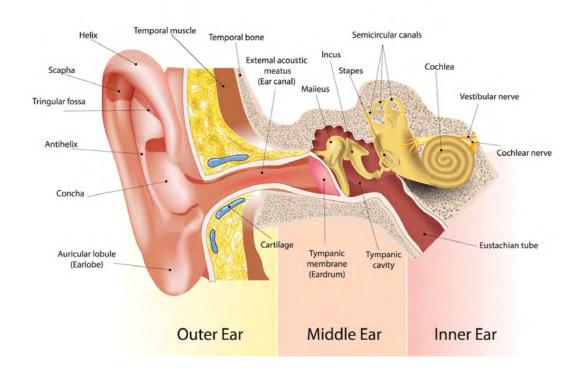
Take our Online Hearing Check and find out how well you're hearing. https://www.broadmeadhearing.com/online-hearing-check

Types of hearing loss

There are 3 types of hearing loss that a clinician can identify.

- 1. Sensorineural This is the most common kind of hearing loss.
- 2. Conductive
- 3. Mixed

Anatomy of the Ear



Type of hearing loss	Sensorineural	Conductive	Mixed
Why?	Hair cells in the inner ear aren't connecting to the cochlear nerve or the inner ear has been damaged.	Sounds aren't able to get through the outer and middle ear.	A combination of sensorineural and conductive hearing loss.
Description	Hard to hear and understand speech clearly.	Hard to hear soft sounds. Louder sounds may be muffled.	Difficult hearing clearly + decreased volume.
Cause	Age, noise exposure, medication that is toxic to hearing, ear infections, family genetics, how the inner ear is formed.	Cerumen (earwax) buildup, ear infections, benign tumours, perforated eardrum, shape of outer or middle ear at birth.	Can be a combination of causes.
Treatment	Amplification with hearing aids.	Possible medical or surgical assistance. Hearing aids may be required.	Possible medical or surgical assistance. Hearing aids may be required.

Is tinnitus the same as hearing loss?

While tinnitus (pronounced tih-NITE-us or TIN-ih-tus) can make it harder to hear, the condition does not cause hearing loss. Tinnitus is often described as a ringing, humming, or buzzing sound. Most people have experienced tinnitus at some point—think of the high-pitched noise that lingers after being at a loud concert or a nightclub. While most people report their tinnitus doesn't bother them a lot, for those who are severely affected, it can significantly impact quality of life.

There are 2 kinds of tinnitus:

- 1. Subjective: only the person with the tinnitus can hear the noise.
- **2.** Objective: as in the case of a whooshing sound with each heartbeat, a physician may be able to hear the same sound with a stethoscope.

37%¹ of adult Canadians report experiencing tinnitus last year; for 7% it affects their day-to-day activities.

What causes tinnitus?

There are a variety of factors that may be associated with tinnitus:

- Hearing loss
- Noise exposure
- Head injury
- Thyroid problems
- Muscle tension in head/neck
- Specific medications
- Other health concerns such as Meniere's disease

By far, hearing loss is the largest contributing factor with 70-85% of people with hearing loss reporting some tinnitus.

Tinnitus may be a sign of inner ear damage or other health conditions so it's important to speak to an clinician if you're experiencing tinnitus. The good news is there are therapies available to treat tinnitus. Speak with an clincian about Tinnitus Retraining Therapy, and a unique program designed to improve your specific challenges with tinnitus.





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1. Canadian Hearing Services (2019). Tinnitus and Hyperacusis. Retrieved from: https://www.chs.ca/tinnitus-and-hyperacusis

What are hearing aids?

Hearing aids are micro-computers, worn in or behind the ear, that make it possible for a person with hearing loss to hear sound.

Depending on the type and degree of hearing loss, each person will need the hearing aids to amplify (increase) different sounds on the low-to-high frequency spectrum. This is why a clinician programs hearing aids to a person's individual needs.



How do hearing aids work?

All hearing aids have the same main components: a computer chip, a microphone, an amplifier, a receiver and a disposable or rechargeable battery.





How a clinician chooses hearing aids for you

There are many factors that go into choosing a hearing aid. Your clinician will ask you specific questions and listen to your perspective on your hearing. Then your clinician will perform a **comprehensive hearing evaluation**. Based on the case history, test results, and your personal preferences, your clinician will recommend hearing aids that are best suited for you.

A clinician takes into consideration:

- Your level of hearing loss
- Your lifestyle and what type of listening situations apply to you
- Your technology preferences. For example, do you want to connect your hearing aids wirelessly to your smartphone or television?
- Comfort based on the size and shape of your ear
- Price and quality
- Rechargeable or battery-powered
- How well your fingers and hands can manage small items
- Other conditions such as tinnitus

Hearing aid styles

There are 6 main hearing aid styles.

Each style is best suited for specific factors including the degree of hearing loss, the size and shape of the inner and outer ear, ease of handling and personal preferences for technology, shape and colour (there are lots of colours available!). Each style is often referred to by its short form – such as "CIC" or "BTE" – so we've included the full name and the short form for reference.



Behind-the-Ear (BTE)

Sits behind the ear. A clear tube directs sound into an earmold that sits in the ear canal.

Suitable for Mild to Profound Hearing Loss



Completely-in-the-Canal (CIC)

Virtually invisible. Need dexterity to handle.

Suitable for Mild to Severe Hearing Loss



Invisible-in-the-Canal (IIC)

Placed deeply in the ear so it's virtually invisible.

Suitable for Mild to Severe Hearing Loss



In-the-Canal (ITC)

Custom fit to the shape of your ear. Can include manual controls (e.g. for volume).

Suitable for Mild to Severe Hearing Loss



In-the-Ear (ITE)

Custom fit to the shape of your ear. Has manual controls.

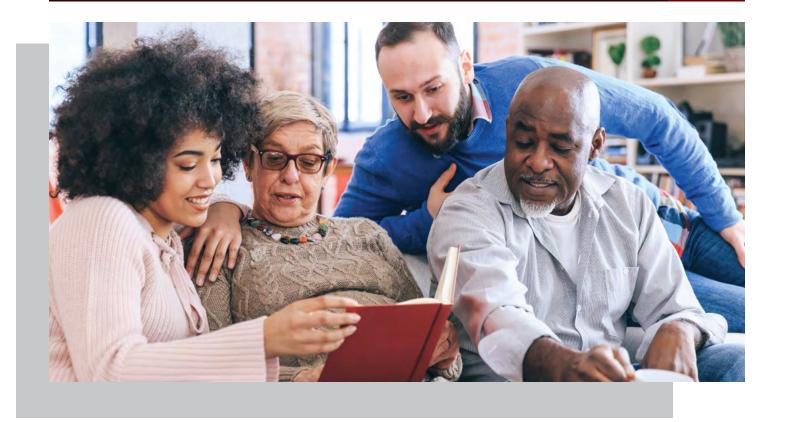
Suitable for Mild to Severe Hearing Loss



Receiver-in-the-Ear / Receiver-in-Canal (RITE or RIC)

The speaker sits in the ear canal and is connected to the hearing aid by a thin wire.

Suitable for Mild to Severe Hearing Loss



How much do hearing aids cost?

With hearing aids, the higher the level of technology, the more features are included. Your clinician will be able to point you in the right direction by giving you a recommendation for the technology and features that will work best for you. Your insurance provider can confirm whether hearing aids are covered. There is no sales tax on hearing aids.

Standard Technology: \$1,850 - \$2,350 per ear.

These hearing aids will amplify most sounds of speech and work well in quiet or stable (not a lot of variety) listening situations.

Advanced Technology: \$2,250 - \$2,650 per ear.

This technology is available from every manufacturer and is a very popular option. Most hearing aids in this range have some form of noise management that will automatically help make noisy environments more comfortable. There are generally more adjustments available to the clinician in this range so the fine tuning can be more specific to each individual's listening preferences. Includes batteries, or a charger for rechargeable hearing aids.

Premium Technology: \$2,590 - \$2,850 per ear.

The right and left hearing aids work together as a unit; this is called binaural synchronization. They offer more options for fine tuning, control background noise, and offer a more natural listening experience. Premium hearing aids are great for dynamic listening situations like dining rooms or large group environments, and for the best, most natural quality sound.

Popular hearing aid brands

There are 24 different hearing aid manufacturers worldwide and each company produces several lines or models of hearing aids. This results in a competitive industry with each manufacturer striving to produce the best product. Some hearing clinics are owned by a manufacturer, and mainly offer their parent company's hearing aids.

Because Broadmead and Oak Bay Hearing Clinics are independently owned, we can offer the latest technology from all manufacturers. This allows us to focus on the hearing aid recommendation that is best for you.

These are some of the best-known manufacturers:

















Hearing better for life

If you, or the people around you, have noticed changes in your hearing or balance then you may be ready to speak with clinician.

The clinician will ask questions related to your hearing and tinnitus (if you experience it), as well as your history of noise exposure, dizziness, family history and general health. This information will help determine the cause and location of hearing loss.

Whether you have a long-term hearing loss or if you are just noticing a lack of "clarity" with speech, a clinician can help. Hearing is vital to our enjoyment and experience of life. We hope this guide to better hearing has been helpful.

If you have questions about your hearing or balance, we'd love to hear from you.



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