







Learning Objectives

By the end of this module, you will be able to:

- Explain the care pathway for managing hearing loss in older people.
- List the various tests used for hearing assessment.
- Outline effective communication strategies for family members and caregivers when interacting with a person who has hearing loss.





Understanding Hearing Loss

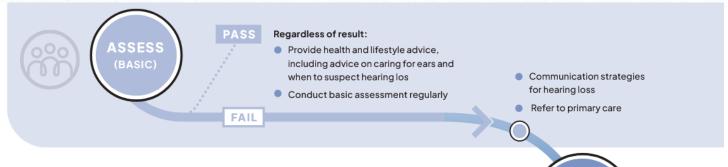
- Hearing loss is one of the most common sensory losses in older people.
- When left untreated, hearing loss can hinder communication, leading to social isolation.
- Hearing loss can be associated with other health issues (e.g., cognitive impairment, depression, anxiety, balance disorders), exposing the individual to increased risk of adverse events.
- Hearing is essential for intrinsic capacity and designing care interventions responsive to the person's needs.





Care pathway to manage hearing loss





IF DEAFNESS

(Audiometry: ≥ 80 dB)

- Refer to specialized hearing care
 - Evaluate and provide hearing device (hearing aids or cochlear implants)
- If no hearing device available, inform about communication strategies

IF MODERATE TO SEVERE HEARING LOSS

(Audiometry: 35-< 80 dB)

- Refer to trained health worker
- Provide hearing aids
- If no hearing aids available, inform about communication strategies —

IF NORMAL OR MILD HEARING LOSS

(Audiometry: < 35 dB)

- Provide advice on caring for ears and when to suspect hearing loss
- Encourage regular hearing check-up (every 1-3 years)



ASSESS (IN-DEPTH) A, B and C

Assess

hearing capacity

Diagnostic audiometry

First, perform ear exam using otoscopy

If wax impaction,

treat and repeat hearing test



Assess

social and physical environments

- Need for home adaptations
- Need for assistive products (vibrating or flashing alarms, sound amplifiers)
- Social care and support needs (ADLs, social participation)
- Carers' support needs
- Consider potential interventions

Assess for red flags

- Inappropriate medication(s) (ototoxic medication)
- Noise exposure
- History of sudden or rapidly progressive hearing loss
- Unilateral or asymmetric hearing loss
- Complaint of ear pain, discharge or dizziness
- History of ear diseases, such as recurrent or chronic otitis media
- Consider potential interventions



a care plan & MONITOR







Assessment of ear problems and hearing capacity

Ear exam using otoscopy

- 1. Pull the pinna back and upwards to straighten the ear canal, while gently pulling the tragus forward.
- 2. Shine a light into the ear canal to check for earwax, pus, swelling, redness, or foreign bodies.
- 3. Earwax can be removed by washout.
- 4. A hearing test should be repeated after earwax removal.

In-depth hearing assessment

- Pure tone audiometry (PTA)
- Speech audiometry
- Tympanometry

Hearing loss according to severity

(in the better-hearing ear)

Normal hearing <20 dB

Mild hearing loss 20-34.9 dB

Moderate to severe hearing loss 35-79.9 dB

Deafness ≥80 dB





Health and lifestyle advice



For all older people

- Clean the outer ear with a soft cloth.
- Avoid inserting objects into the ears.
- Avoid contaminated water in the ears.
- Do not share earphones or earplugs.
- Protect your ears from loud sounds; use earplugs in noisy areas.
- Get regular hearing check-ups; seek help for ear pain, discharge, or hearing issues.

See a health worker if hearing loss is suspected:

- Frequently asking others to repeat themselves.
- Increasing volume on devices.
- Difficulty following conversations in noise.
- Trouble understanding phone calls.
- Ringing in the ears (tinnitus).
- Missing sounds like a doorbell or alarms.
- Being told you speak loudly.





Community-based health care



- Give the person your full attention.
- Let them see your face when you speak.
- Ensure there is good lighting on your face.
- Get the person's attention before speaking.
- Reduce background noise or move to a quieter location.
- Speak clearly and at a slower pace. Do not shout.
- Allow the person time to speak.
- Be patient and respectful.
- Use nonverbal signals
- In groups, encourage people to speak one at a time.
- Do not stop communicating with a person with hearing loss.
- If the person has difficulty speaking, use visual aids.
- Be mindful of reasons for communication challenges that are not related to hearing loss, such as cognitive decline.

Communication strategies







Interventions to Manage Hearing Loss



Normal or mild hearing loss

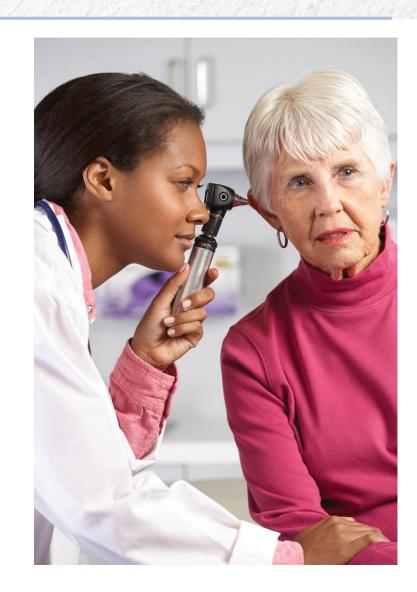
- Advice on caring for ears
- Regular hearing check-up (every 1-3 years)

Moderate to severe hearing loss

- Refer to a trained health worker
 - Provide hearing aids
- Inform about communication strategies

Deafness

- Refer to specialized hearing care
 - Evaluate and provide hearing aids or cochlear implants
- Inform about communication strategies









Interventions for diseases and risk factors



Noise exposure

Environmental modifications.

Advise on safe listening volume and use of earplugs



Inappropriate medication(s)

Full medication review and adjustment of medications. Referral for specialised care.



Red flags

(Sudden or rapidly progressive hearing loss; unilateral or asymmetric hearing loss; ear pain, ear discharge, or dizziness; history of ear diseases)

Referral to specialised settings.







Interventions for social and physical environment



Home adaptation

Environmental modifications to facilitate communication.



Need for assistive products

Provide hearing devices.

Consider phone amplifiers, text messaging devices, apps...



Social care and support needs

Promote social interactions. Support tasks of daily living.



Carer's support needs

Provide training on how to adapt communication.





Summary

- Simple household and community actions can lessen the impact of hearing loss through effective communication strategies.
- Trained health workers can fit hearing aids, but some individuals may need specialist guidance for optimal use.
- Community stakeholders can support older people with hearing loss by offering information, adapting communication styles at events, and creating peer support groups.





References

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