Hearing Loss Linked to ‘Unsuccessful’ Aging

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ORLANDO — Elderly persons with hearing loss are more likely to describe themselves as aging unsuccessfully, compared with their peers who hear well, despite the absence of any other chronic conditions, according to preliminary data presented at a poster at the annual meeting of the Gerontological Society of America. But this impairment to healthy aging is often underappreciated by physicians, said the lead investigator, Margaret Wallhagen, Ph.D., R.N.

“Hearing loss is strongly linked to depression,” she said in an interview. “It makes people feel isolated and left out, and they may feel bad or embarrassed because they can misinterpret things.”

Dr. Wallhagen said that almost half of the population aged 65 and older (46%) report having hearing problems, and in one study of 120 elderly subjects, they were found to have a hearing threshold 25 to 35 decibels higher than that of healthy individuals. One-third of those with no chronic conditions and one-half of those with two or more chronic conditions described themselves as aging successfully.

The inconsistency between subjects’ physical health and their sense of successful aging can be partly explained by their hearing, said Dr. Wallhagen, a professor in the department of physiologic nursing at the University of California, San Francisco.

Subjects rating themselves as not aging successfully had significantly more hearing loss (a score of 2.26 on the hearing loss scale) than did subjects who said they were aging well (a score of 1.57), even in the absence of any chronic conditions.

And even among those with two or more chronic conditions, subjects who described themselves as aging successfully had less hearing loss (score of 2.02) as compared with those who said they were not aging well (score of 3.22).

“Our data support the importance of hearing in the aging experience,” Dr. Wallhagen said. “My wish is that physicians would pay more attention to hearing loss in their patients, and if they find it, they can send them for an evaluation.”

Other research by her group has shown that more than 80% of elderly people never have their hearing impairment addressed by their primary care practitioner—or when it is identified, its importance is discounted.

“Physicians have a time limitation, so they focus on things they think are critical. And [hearing loss] not something people die of, so that’s why it is often ignored,” she said.

Additionally, another of her studies has found that spousal hearing loss is a significant predictor of unsuccessful aging in the partner.

Dr. Wallhagen said that while it is often assumed the adjustment to hearing aids may be too difficult for many aging adults, most can be coached through the transition period.

He said physicians can help people with their expectations. “In other words, they need to know that they have to work at wearing hearing aids. You can’t just put them on like glasses,” he said. “But many people—if they are given the coaching and if they are instructed to think that their brain has to relearn how to listen—they can get used to them.”

Dr. Wallhagen said in another study she is doing, many subjects with newly acquired hearing aids are surprised at the number of sounds they did not even know they were missing.

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