

# Cover Your Ears

Hearing decline is inevitable, but there are steps you can take to slow the slide. By Tamer Abouras

There's an expression often invoked when talking about veteran athletes: "Father Time is undefeated." No matter how skilled you are, the passage of time will eventually take away most of what made you great. And unfortunately, this concept is not exclusive to sports.

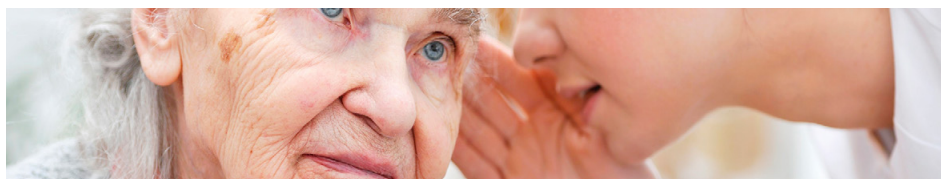
As our bodies age, their original parts start to wear down and don't function as effectively as they once did. One of the more common of these declines is hearing loss. According to the World Health Organization, "Approximately one-third of people over 65 years of age are affected by disabling hearing loss."

## RISK FACTORS

Although aging itself is a chief cause of hearing loss — due to what the Mayo Clinic describes as "degeneration of delicate inner ear structure" which occurs over the course of time — there are several other risk factors that can lead to hearing decline and loss, often very prematurely.

According to the Mayo Clinic and the Better Hearing Institute, some of these risk factors include:

- **Exposure to Loud Noises:** Damaging the cells of your inner ear, this can take place through long-term exposure to loud noise or short blasts such as gunshots.
- **Occupational Noises:** Similar to long-term exposure to loud noises, any consistently disruptive sounds that are a part of your regular work environment can lead to hearing decline and loss. At-risk occupations may include construction, factory work or farming.
- **Recreational Noises:** In addition to loud blasts from things like gunshots or jet engines, other sources of dangerously high noise levels may include motorcycles, four-wheelers, snowmobiles and even loud music.
- **Certain Medications:** High doses of aspirin, assorted pain relievers, chemotherapy drugs, antimalarial drugs and loop diuretics all can contribute to temporary ringing in the ears and



Ranges	Decibels	Noise Source
Safe Range	30	Whisper
	60	Normal conversation
	78	Washing machine
Risk Range	80-90	Heavy city traffic, power lawn mower
	90	Motorcycle
	100	Snowmobile, hand drill
	110	Chain saw, rock concert
Injury Range	120	Ambulance siren
	140	Jet engine at takeoff
	165	12-gauge shotgun blast
	180	Rocket launch

hearing loss and/or damage your inner ear.

- **Illness:** Any sickness that results in high fever, such as meningitis, has the potential to damage the cochlea.
- **Heredity:** Damage from sound and long-term wear from aging may be in your genes.

The Better Hearing Institute recommends you seek medical attention if you experience any ringing or buzzing in your ears (a sign of tinnitus), have difficulty understanding people talking after exposure to noise or have a feeling of "fullness" in your ears after exiting a noisy area.

The Mayo Clinic also provides a very instructive chart of decibel levels that are acceptable and safe and which noise exposure should be avoided, based on The National Institute on Deafness and Other Communication Disorders, 2010, and The National Institute for Occupational Safety and Health, 2013.

## PREVENTION

As for keeping your hearing as protected as you can, both the Mayo Clinic and Better Hearing Insti-

tute recommend taking a few proactive steps both at work and in your personal life that will prevent hearing loss and decline. Some measures include:

- **Checking with Your Employer:** If you work in an at-risk occupation, your employer is required by federal and (possibly state) law to have a hearing protection program in place.
- **Wear Protection:** Earmuffs, earplugs, etc.
- **Limit Loud Noise Exposure:** iPods, MP3 players and computer use with headphones on should be watched. Also, avoid recreational risks and buy quieter in-home products.
- **Have Regular Checkups:** Your audiologist may be able to spot issues that you hardly notice at first.

Father Time may indeed be undefeated, but by following these steps, you'll increase your chances of hearing the proverbial fat lady sing.

*Tamer Abouras is assistant editor of ADVANCE for Speech & Hearing*

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