

PCAST Report

PRESIDENT'S COUNCIL OF ADVISORS ON SCIENCE AND TECHNOLOGY

Hearing Healthcare for Adults

Discussion

- PCAST report:
http://hearingloss.org/sites/default/files/docs/PCAST_Hearing_Tech_LetterReport_FINAL.pdf
- Hearing Health Care for Adults:
<http://nationalacademies.org/hmd/reports/2016/Hearing-Health-Care-for-Adults.aspx>

The HCAA National convention seemed to have a theme of Healthy Aging and the two reports **PCAST** and **Hearing Health Care for Adults** formed the corner stone. We have asked a number of audiologists, instrument specialists, doctors and others if they would consent to discuss their opinions in this column and in our Guidance and Layperson's Guide sections. Most of the discussions will be presented over the next few months. However, Jill E. Preminger, Ph.D. has informally responded, off the cuff, to get the discussion started.

Obviously one would need to become somewhat familiar with these reports to follow the discussions. Doing so is a form of self-advocacy that we all must learn to do. We know that this is difficult and time consuming but it is a requirement to be considered a good consumer.

- Note: **PCAST** is the PRESIDENT'S COUNCIL OF ADVISORS ON SCIENCE AND TECHNOLOGY. They sent the President a 10 page recommendation regarding health aging/hearing loss. This was a summary of a much larger paper of recommendations. Their goal was to give him a doable list of things that could be accomplished in his tenure.
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- **PSAPs** are personal sound amplification products. Some are currently on the market. It may look like a hearing aid and discussed like a hearing aid but the words hearing aid is never used. If the words Hearing Aid is used, then it must meet FDA regulations of hearing aids.

Ed Schickel

Jill Preminger, Ph.D. responds below.

In the National Academies of Sciences Engineering & Medicine Report on **Hearing Health Care for Adults: Priorities for Improving Access and Affordability, Goal 10**

is to "Evaluate and implement innovative models of hearing healthcare to improve access, quality, and affordability."

<http://www.nationalacademies.org/hmd/Reports/2016/Hearing-Health-Care-for-Adults.aspx>

Most of the on-line and in-person discussions about this report focuses on access to hearing aids and affordability of hearing aids. But we cannot forget that part of this goal is to improve **quality of hearing healthcare**. It is also important to remember that the report does not write about improving the quality of hearing aids (or improving access or affordability of hearing aids). The report refers specifically to hearing healthcare.

This is explained further in Chapter 3 of the report which is titled: **Hearing Health Care Services: Improving Access and Quality**

In this chapter it is written:

"Pharmaceuticals and medical devices cannot always provide definitive solutions for chronic health conditions or meet the specific needs and preferences of every individual. Similarly, for individuals with hearing loss, hearing aids cannot unequivocally address the multifaceted challenges of living with hearing loss, such as the hearing loss itself, communication difficulties, changes in quality of life and possible comorbidities."

"Like other chronic health conditions, Like other chronic health conditions, hearing loss requires a holistic, individual-centered approach to care that blends both medical and non-medical solutions, such as auditory rehabilitation to care that blends both medical and non-medical solutions, such as auditory rehabilitation."

So, yes now it is possible for people to purchase inexpensive PSAPs rather than hearing aids and yes these PSAPs can be purchased over the internet or in a drugstore. But hearing aids alone are not an "easy fix" for hearing loss. As discussed in the National Institute of Medicine report, the solution to hearing loss is not hearing aids, rather the solution to hearing loss is a **comprehensive auditory rehabilitation program** that may include hearing aids.

Research has shown that:

- Hearing aids are best fit and adjusted using real ear measures – by putting a tiny tube into a person's ear canal the audiologist can measure exactly how much sound is being delivered by the hearing aid for each individual user.
- Most new hearing aid users require personal instruction to learn how to manipulate hearing aids, put them in their ear correctly, and take care of them.
- Often, new hearing aid users need some adjustment to their hearing aids, or may need more instruction on how to use and care for their hearing aids after they are first fit with them.
- It takes time and effort to get used to their hearing aids. An audiologist can "coach" a new user to achieve success
- Often times a hearing aid alone is not enough. Often speech communication can be improved by using additional hearing assistance technologies such as a remote (Bluetooth or FM) mic, an induction loop, or a telephone

amplifier. Most new users need to learn about these options and need help learning to use them.

- Some new hearing aid users learn how to use effective communication strategies on their own. However, many do not. Again, this is something that can be learned from an audiologist. The audiologist may also recommend internet-based auditory training or lip-reading training.
- Finally- as all HLAA members know, many people learn best how to adjust to life with hearing loss by sharing experiences with others who have hearing loss.

In summary, most discussion about PSAPs focuses solely on a hearing aid. But hearing aids alone cannot manage hearing loss because hearing loss is a chronic health condition. Someone with Type II diabetes cannot just order insulin over the internet. Instead they have to learn how and when to administer the insulin. Plus, they need to learn how they can manage their diet and weight. The same is true for hearing loss. People shouldn't just order hearing aids over the internet, they need the hearing aid adjusted to their specific hearing loss and ears, and they need to learn how to manage the hearing aid and their hearing loss.

I am hopeful that with the rise of PSAPs in the marketplace, we may begin to see new lower cost hearing aids. If this does happen, audiologists can make these lower cost hearing aids available to their patients. But patients will also have to pay for the services of the audiologist that ensure benefit and satisfaction from hearing aids.

Regards,
Jill

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