



Hearing loss and depression.

Information for your patients.

As a physician, you probably ask your patients if they have had their hearing checked recently. Patients may also seek you out for information about getting their hearing checked. Outside of referring them to get a test or scan it is important to let them know of the potential health risks of ignoring their hearing loss. Some of those risks can include life-threatening disorders like **Depression**.

The link between hearing loss and depression has been reinforced by recent studies.

Several studies have been conducted on the link between depression and hearing loss. Recent findings indicate that of the groups studied, women of all ages and adults aged 18 to 69 with hearing loss are more likely to experience "significant depression" than hearing loss sufferers over 70.¹

"We found a significant association between hearing impairment and moderate to severe depression."²

There are several likely reasons that loss of hearing leads to depression in so many. Communication, which is vital to social interactions, becomes a source of stress when someone has to strain to hear others speak, and frequent misunderstandings result in embarrassment. After a while, people with untreated hearing loss begin to avoid social situations, particularly if they involve loud surroundings like parties or crowded restaurants. Withdrawal tends to progress until the person quits on life, choosing to remain in silent isolation rather than struggle to hear and communicate publicly. Hearing loss sufferers may think they simply cannot be helped because hearing loss is a "terminal" condition for which there is no cure. They may feel their hearing loss is a signal that they are simply too old to participate in social activities. Cutting oneself off from society and activities is a red flag for depression.

"Loss of hearing represents more than just difficulty hearing sounds. It can lead to social isolation and depression."³

An increased number of studies in recent years are reinforcing the association between untreated hearing loss and depression. While further research to establish causation is ongoing, there is enough data to suggest physicians inform patients of the link between hearing loss and depression, to advise having hearing tested annually and encourage patients to evaluate wearing hearing aids if recommended by their hearing care professional.

Women and adults under the age of 70 are more susceptible to depression from hearing loss.



Facts medical professionals need to know about the risk of patients with hearing loss developing depression:

1. In a study conducted on Generation X and Baby Boomer patients with untreated hearing loss, participants were found more likely to develop depression and other psychological issues than their hearing peers.⁴
2. Another large study of adults 50 and older with untreated hearing loss found they were more likely to experience depression and other emotional and mental instabilities, and were significantly less socially active than their peers who wear hearing aids.⁵
3. This same study found depression and similar disorders tend to worsen as hearing ability declines.
4. Patients with untreated hearing loss find it more difficult to communicate with others, leading to the avoidance of social interaction with friends and family. Isolation is a known contributor to depression.⁶
5. The onset of depression in older adults has been associated with the development of dementia or Alzheimer's disease, which is also a co-morbidity of hearing loss.⁷
6. Along with depression, patients with untreated hearing loss are known to experience anxiety, paranoia, relationship problems, stress, and other negative emotions.⁸
7. A retrospective study with 117 patients older than 65 years and diagnosed with moderate to profound hearing loss shows that older adults with moderate to profound hearing loss gain benefit from hearing aids or cochlear implants not only in terms of improved hearing function, but also in terms of positive effects on anxiety, depression, health status and quality of life.⁹
8. 36% of patients who begin wearing hearing aids experience improved overall mental health, while 34% increase their social engagement.¹⁰
9. Despite the fact that hearing aids can help improve patients' lives, the average span of time from patient realisation of hearing loss to purchase of hearing aids is seven years.¹¹

"... but studies also show that people with hearing loss who use hearing aids often have fewer depressive symptoms, greater social engagement, and improved quality of life."¹²

1. Li, C.M. et al. (2014). Hearing Impairment Associated with Depression in US Adults, National Health and Nutrition Examination Survey 2005-2010. JAMA Otolaryngol Head Neck Surg, 140(4), 293-302.

2. HealthDay News. (2014). Hearing Loss Tied to Depression in Study. (<http://www.webmd.com/depression/news/20140306/hearing-loss-tied-to-depression-in-study>).

3. Harvard Health Blog. (2013). Hearing loss may be linked to mental decline. (<http://www.health.harvard.edu/blog/hearing-loss-may-be-linked-to-mental-decline-201301225824>).

4. Monzani, D, Galeazzi, G.M., Genovese, E., Marrara, A., Martini, A. (2008). Psychological profile and social behavior of working adults with mild or moderate hearing loss. ACTA otorhinolaryngologica italica, 28, 61-66.

5. National Council on Aging. (1999). The Consequences of Untreated Hearing Loss in Older Persons. (<http://www.ncoa.org/assets/files/pdf/center-for-healthy-aging/NCOA-Study-1999.pdf>).

6. Ilardi, S. (2009). Social Isolation: A Modern Plague. Psychology Today. (<http://www.psychologytoday.com/blog/the-depression-cure/200907/social-isolation-modern-plague>).

7. Johns Hopkins Medicine. (2013). Hearing Loss in Older Adults Tied to More Hospitalizations and Poorer Physical and Mental Health. (http://www.hopkinsmedicine.org/news/media/releases/hearing_loss_in_older_adults_tied_to_more_hospitalizations_and_poorer_physical_and_mental_health).

8. HearingAids.com. (2013). Hearing Loss & You. (<http://www.hearingaids.com/hearing-loss-you/hearing-loss-you/>).

9. Manrique-Huarte, R., Calavia, D., Huarte Irujo, A., Gir6n, I., Manrique Rodr6guez, M. (2016). Treatment for Hearing Loss among the Elderly: Auditory Outcomes and Impact on Quality of Life. Audiol Neurootol. 21 Suppl (1), 29-35.

10. National Council on Aging. (2014). Hearing Loss: it's a Family Affair. (<http://www.ncoa.org/improve-health/community-education/hearing-loss-its-a-family.html>).

11. Kochkin S. (2012). MarkeTrak VIII: The Key Influencing Factors in Hearing Aid Purchase Intent. Hearing Review 19(3), 12-25.

12. Better Hearing Institute. (2013). Don't Let Unaddressed Hearing Loss Spiral into Depression, BHI Cautions, Urging Gen Xers and Baby Boomers to Get Their Hearing Checked. (<http://www.betterhearing.org/news/don%E2%80%99t-let-unaddressed-hearing-loss-spiral-depression>).

WS Audiology Pty Ltd

Level 4, 11 Finchley Street Milton, Qld, 4064, Australia

Phone: 1300 787 797 | signia-pro.com.au

Can:Do Hearing

An independent and not for profit hearing care clinic.



Can: Do Hearing has multiple locations across Adelaide.

Call **08 8267 9200** or visit candohearing.com.au to find out more, or to find your nearest clinic.



**Can:Do
Hearing**