



# CANADIAN HARD OF HEARING ASSOCIATION EDMONTON BRANCH

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## FREQUENTLY ASKED QUESTIONS

### WHAT TYPES AND CAUSES OF HEARING LOSS ARE THERE?

Many terms are used for hearing loss. The word deaf according to the Oxford Dictionary means wholly or partially without hearing. Deaf with a capital D refers to the individuals who see themselves as members of a cultural group and are accepted by the Deaf Community. Part of the requirements of this group is the use of American Sign Language (ASL) as their mode of communication. Other terms are late deafened and hard of hearing.

A late deafened person identifies with the hearing society. They may have lost their hearing gradually or suddenly, and are unable to understand speech without visual aids such as speech-reading, sign language, or CART (Computer Aided Real-time Transcription). The loss of hearing is after speech and language (post-lingual) have been developed and usually after 13 years of age. The individual will use speech when communicating with others. Hard of hearing describes a person with a mild to profound hearing loss. The person usually uses hearing aides to allow them to use their residual hearing to communicate with others and may or may not use other assistive listening devices such as an FM system. Other devices they may find helpful are speech reading, CART, or note-taker (for students). Hearing loss can be conductive, sensorineural, mixed, or central. A conductive hearing loss occurs in the outer and/or middle ear. It may be caused by earwax blockage, a punctured eardrum, heredity, birth defects, or an ear infection. This type of hearing loss may be treated by medicine or surgery. Sensorineural hearing loss is caused by damage to the inner ear (cochlear). It is also called nerve damage and is irreversible. Hearing aid use is the most common mode of treatment. Cochlear implants are helpful for this type hearing loss but only if it is a severe or profound loss. The damage to the inner ear can be as a result of aging, viral and bacterial infections such as chicken pox or a flu, heredity, medication, loud noise, tumors, fluid backup, and trauma caused by a head injury. A combination of conductive and sensorineural hearing loss is called mixed hearing loss. Central hearing loss occurs when there is nerve damage in the brain or the brain pathways.

The amount of hearing loss is defined as a mild, moderate, severe or profound loss and is identified by the decibel (dB) loss. A mild loss is 25 - 40 dB, moderate 41 - 55 dB, moderate severe 56 - 70 dB, severe 71 - 90 dB, and profound 91+ dB. An individual with a mild hearing loss has difficulty hearing soft sounds and a far-away speaker; a moderate loss can lead to misunderstanding of conversational speech if the speaker is more than 5 feet away or the speaker is close but in a noisy environment such as a public area or classroom. For someone with a moderate severe loss the speaker must be loud to be understood and any group discussion will be hard to understand and a severe loss the speaker should be no further than one foot away. With a profound loss may result in absolute silence or only loud sounds may be heard, such as a chainsaw or jet. At this level of loss the person is very dependent on visual clues and even vibrations. Many people have a hard time understanding hearing loss because sometimes the person will hear sounds. An example would be a phone ringing. - if the person is 2 - 3 feet away they hear the phone ring but not if they are 10 feet away or if there is a sudden or constant loud noise. This can be interpreted that the person is ignoring the sound when in fact they did not hear it. A person health can also affect what they hear. If you are congested due to a sinus cold or flu you will hear less, this can increase the level of hearing loss temporarily.

Other terms you may hear are prelingual and postlingual. These refer to when the hearing loss occurred; if it was before or after speech and language development. Pre means before and post after. A child who may be born with a hearing loss or lose their hearing up to three years of age would be prelingual. Bilateral refers to a hearing loss in both ears and unilateral to one ear. Please remember if you have suffered a hearing loss do take the time to adjust to it; it is a new situation for you. You would allow yourself time to adjust to a new job or a move. Do not be afraid to identify your needs. It is better to teach others how to communicate with you than to have them misunderstand. They may think you are unfriendly, rude, incompetent, or ignoring them.



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### HOW COMMON IS HEARING LOSS?

One out of ten Canadians has a hearing loss including 6 out of 1000 children. Of these six, nine out of ten are born to hearing parents. It is a hidden disability that has many causes and each hearing loss is unique to the individual. Unfortunately, society can not treat them all the same because people will rarely (if ever) have the same type, level, and range of hearing loss including their coping skills and age of loss.

### SOME COMMON PROBLEMS WITH A HEARING AID:

- If you're hearing aides whistle you may want to go to your audiologist or hearing aid reactionary to obtain new ear molds. They may no longer fit correctly or are breaking down due to age. You may not hear the sounds but others around you will.
- If noises are distorted you may need adjustments to your hearing aid. This may or may not be done by your audiologist depending on the cause and type of hearing aid you have.
- If you have a problem with your ears being itchy or feel hot consult your audiologist or hearing aid reactionary they may have a cream that will help you with this problem.
- It is critical you keep your hearing aides dry. Please contact your local audiologist or hearing aid reactionary for a compartment you can store your hearing aids in overnight that contains a substance to remove moisture.
- Other items that are useful are battery testers, stethoscopes to allow others to check your hearing aids and to see if they are working correctly, air blowers, and syringes for cleaning your ear molds.

### WHAT IS AN ASSISTIVE DEVICE?

The term "Assistive Devices" itself can be somewhat confusing, basically an hard of hearing assistive device is anything designed to "help" the hard of hearing in various situations. This could include:

- Bed shakers alarms or "deaf kits" for home and hotel use
- Amplified Phones and accessories
- SpeechViewer Software and Pocket Communicators
- Deaf Doorbells and alarms
- TTY's and Telephone Accessories

### WHAT IS TINNITUS?

Tinnitus is a ringing or buzzing in the ears according to the Oxford Dictionary. This is in the absence of external sounds that could account for the sounds heard. This condition may be intermittent or constant, have one or more tones, and vary in volume. It does not always include hearing loss and it is not a disease. If you have "ringing in your ears" please consult your family doctor or talk to your audiologist.

### WHAT IS A COCHLEAR IMPLANT?

A cochlear implant is an electronic prosthesis that stimulates the auditory nerve to allow the sounds to be heard. The candidate must go through a testing process to see if they would benefit from this surgery. Usually the person has a severe or profound hearing loss and may or may not benefit from hearing aids.