Screening for Hearing Loss in Older Adults

The US Preventive Services Task Force (USPSTF) recently published recommendations on screening for hearing loss in older adults.

What Is Hearing Loss in Older Adults?
There are many causes of hearing loss, but when older people gradually lose their hearing because of age, it is referred to as age-related hearing loss or presbycusis. This is quite common: about one-third of 65-year-olds and half of 75-year-olds have some degree of hearing loss. Presbycusis usually starts with a decreased ability to hear high-pitched sounds.

Hearing loss can make it difficult for older adults to communicate with friends and family and to function in society. It is linked to social isolation, depression, and dementia. When it affects quality of life, age-related hearing loss can be treated with hearing aids. However, many older adults are reluctant to use them or find them difficult to use properly.

What Tests Are Used to Screen for Hearing Loss?
Screening tests for hearing loss include asking patients “Do you have difficulty with your hearing?”; using formal patient questionnaires such as the Hearing Handicap Inventory for the Elderly; using technology (a handheld otoscope with a built-in screening audiometer, tablet-based audiogram apps); and using a soft sound (whispered voice, finger rub, watch tick).

The gold-standard test for diagnosing hearing loss is a pure-tone audiogram. This is when a patient sits in a soundproof booth and an audiologist assesses their ability to detect sounds at a variety of different frequencies and volumes.

What Is the Patient Population Under Consideration for Screening for Hearing Loss?
This recommendation applies to adults aged 50 years or older who have no signs or symptoms of hearing loss or changes in hearing.

What Are the Potential Benefits and Harms of Screening for Hearing Loss?
There is a lack of direct evidence on the benefits of screening for hearing loss in terms of clinical outcomes (subjective or objective hearing loss, dementia, cognitive impairment). The benefit of earlier hearing aid use among those who have hearing loss detected via screening, but no perceived hearing problems, is not clear. There is no standard guideline on when hearing aids are recommended, and early use of hearing aids does not prevent or delay further decline in age-related hearing loss.

Potential harms of screening for hearing loss are likely minimal, as both screening and confirmatory tests are noninvasive. Hearing aids are also low-risk treatments. Potential harms include anxiety, stigma, and middle and outer ear conditions (such as ear infections and wax buildup) linked to hearing aid use.

How Strong Is the Recommendation to Screen for Hearing Loss in Older Adults?
Because of a lack of evidence, the USPSTF concludes that the balance of benefits and harms of screening for hearing loss in older adults who have no symptoms cannot be determined.

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US Preventive Services Task Force
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