

1708 Fall Hill Avenue, Suite 200 Fredericksburg, VA 22401

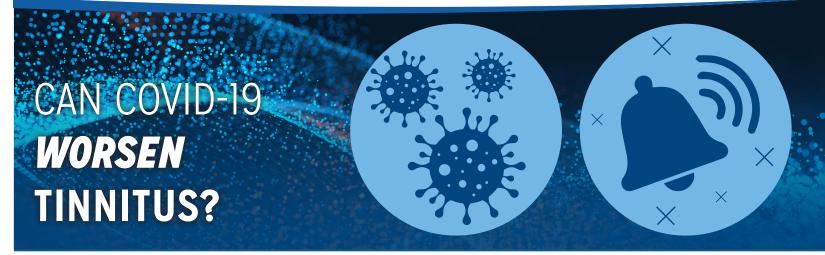
You're invited to a special fitting event at our offices July 19–23.

Join us for a demonstration of the latest Widex hearing technology, featuring Bluetooth® connectivity, rechargeable devices and improved speech recognition in noisy environments.

Reserve your spot today by calling (540) 371-1263







Roughly one in five Americans experience tinnitus, the perception of noise in the ears frequently compared to a ringing or similar sound. Many factors contribute to tinnitus; now we can add COVID-19, thanks to a recent study from Angela Ruskin University in Cambridge, England.¹

The study, which looked at 3,103 people with tinnitus from 48 countries, was conducted in cooperation with both the British Tinnitus Association and the American Tinnitus Association. The results, published in the medical journal Frontiers in Public Health, found that 40% of COVID-19 patients experienced an increase in tinnitus symptoms.

While the majority studied in Cambridge had already been diagnosed with tinnitus, a small number appeared to have developed symptoms due to the coronavirus, leading researchers to speculate that tinnitus may be an additional, though somewhat rare, symptom of COVID-19.

Social distancing was another contributing factor, according to a significant number of tinnitus sufferers whose work and lifestyle

routines were disrupted (46% of UK patients and 29% from North America). Stress, loneliness and difficulty sleeping made tinnitus more bothersome for 32% of respondents.

Other factors mentioned by participants that exacerbated tinnitus symptoms include increased video calls, noisier home environments, homeschooling, and increased coffee and alcohol consumption. Along with the challenges in accessing health care due to COVID-19 restrictions, it's clear the pandemic impacts those with tinnitus across the globe.

"Some of the changes brought about by COVID-19 appear to have had a negative impact on the lives of people with tinnitus and participants in this study reported that COVID-19 symptoms are worsening or, in some cases, even initiating tinnitus and hearing loss," explained Dr. Eldre Beukes, a Research Fellow at ARU and Lamar University in Texas and lead author of the study.

With a long list of possible causes, it's best to schedule an appointment with our team to get to the root cause of your tinnitus.

Beukes EW, Baguley DM, Jacquemin L, et al. Changes in tinnitus experiences during the COVID-19 pandemic. Frontiers in Public Health. 2020;8. DOI=10.3389/fpubh.2020.592878.

CLINIC NEWS

June was a big month for Hearing Resource Center! We welcomed back Dr. Lauren Levengood following the completion of her fellowship and also added another full-time audiologist, Dr. Chelsea Howard. Dr. Howard comes to us with lots of prior experience with hearing aids, cochlear implants and diagnostic testing. Additionally, we added three new 4th year audiology students who are completing the last year of their doctoral program with us. Their names are Ariana Morris from James Madison University, Kirsten Elliott from University of North Texas, and Sheala Wheeler from East Tennessee State University.

Summer is here! As you enjoy the warm weather and mingling with loved ones, don't forget to take care of your ears. Common summer sounds like fireworks, lawnmowers, and power tools can cause hearing damage. Wear ear protection whenever possible, and contact our office with any questions.

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New Study Reveals Hearing & Vision Loss DOUBLES RISK OF DEMENTIA

It's common to lose hearing or vision as you age, but the loss of both can have serious consequences. A new study found that hearing and vision loss put you at double the risk of developing dementia later in life. This study was published in the journal *Neurology* in April 2021.²

The study involved 6,520 people ages 58 to 101. Participants reported their vision and hearing on the following scale:

- Normal
- Reduced, able to function with a hearing aid or glasses.
- Reduced, unable to function even with a hearing aid or glasses.
- No hearing or sight at all.

At the beginning of the study, 932 participants had normal hearing and vision, 2,957 had either hearing or vision loss and 2,631 had both hearing and vision loss. Questionnaires revealed that dementia was more than twice as common in the group with dual sensory impairment (8%) than those with single sensory impairment (2.4%) or no sensory impairment (2.3%).

Every two years, for a total of six years, researchers tested thinking and memory skills with word recall and recognition exercises. The six-year follow-up revealed that a total of 245 people developed dementia. 146 of the 1,964 people with both impairments developed dementia compared to 69 of the 2,396 people with one impairment and 14 of the 737 with no impairment.

These results revealed that those with both hearing and vision loss were twice as likely to develop dementia than the other groups.

"Older people with only a visual or hearing impairment can usually still maintain social contact, so they may not feel as isolated or depressed as people who have both impairments," explained study author JinHyeong Jhoo, M.D., Ph.D. "However, when someone has both impairments, that may increase the risk of isolation and depression, which previous research has found may affect dementia risk and thinking skills later on."

Concerned about your cognitive health or your hearing?

Talk to our team today—(540) 371-1263.

²Byeon, G., et al. Dual sensory impairment and cognitive impairment in the Korean longitudinal elderly cohort. In Neurology. Published online April 07, 2021. DOI: https://doi.org/10.1212/WNL.0000000000011845





Hearing aids are sophisticated devices that receive daily use in harsh environments, where they are subject to moisture, heat, dirt and earwax. Even though they are built to precise standards, at some point, they will need to be replaced. Figuring out when is the key to uninterrupted communication.

No product lasts forever. Over time, mechanical problems can develop, or the technology may simply become obsolete. However, there are steps you can take to prolong the life of your hearing equipment. Cleaning on a regular basis can help prevent problems from occurring. Use a soft, dry cloth and avoid liquids, which might cause damage. Change the wax filter and clean the microphone and any other dirty areas with a soft brush. Be sure to take your hearing devices to a licensed audiologist periodically for check-ups; these can detect issues such as power loss, dirty contact vents and plugged vents.

Servicing and repairs can add up over time. Eventually, these costs will outweigh those required to purchase new hearing devices. You should consider new hearing devices when:

- Your current hearing devices are four or more years old.
- · Your hearing devices have visible damage.
- Your hearing devices have already been repaired previously.
- Your hearing loss worsens, or is no longer helped by your current equipment.
- Newer, better technology for your type/extent of hearing loss is available.

If any of these factors apply to your situation, make an appointment with your audiologist as soon as possible.

