Oral Health Fact Sheet for Dental Professionals

Adults with Hearing Impairment

Hearing loss is the complete or partial loss of ability to hear from one or both ears. Hearing loss may be due to interference with the mechanical reception or amplification of sound to the cochlea involving the ear canal, tympanic membrane, or ear ossicles. Hearing loss may also result from damage to the cochlea and the sensorineural elements (79%) including the auditory nerve and its connections in the brainstem. Hearing may be impaired from birth or may be acquired. (ICD 9 code 389.0)

Prevalence
- 30% ≥60 years
- 14.6% of those ages 41–59
- 7.4% of those 29–40 years
- 30% of cases originating in childhood are associated with syndromes

Manifestations

Clinical
- Hearing impairment and difficulty with language/speech

Oral
- There are no specific increased oral effects in adults

ADA Guidance: Requirements for Dental Practices

Management

Behavioral
- Assess speech, language ability, and degree of hearing impairment when taking a complete medical history. The approach taken by the practitioner should be tailored to the individual. Degree and presentation of hearing impairment may vary significantly.
- Ask patient how they usually communicate (sign language, lip reading, hearing aid, note writing, or combination).
- Periodically confirm that you are understood throughout the appointment.

Lip readers
- Face the patient while speaking, speak clearly and naturally, and make sure that your mask is removed while speaking and mouth is visible. It is preferable to be at the same level as the individual.
- Gain the patient’s attention with a light touch or signal before beginning to speak.
- Communicate only when the patient is looking at you.
- Speak naturally, neither very quickly nor very slowly. Use of complete sentences is preferred over the use of single word directives.
- Avoid technical terms.
- Excessive chat-lip reading is tiring.
- Use written instructions and facial expressions to communicate.

Sign language
- Look directly at the patient and not the interpreter when talking.
- Speak slowly and clearly to the patient—not in the third person about the patient.
- Facial expressions and gestures may be very helpful.
Hearing aids

- Eliminate or minimize background noise (music, etc.) during the conversation.
- Avoid sudden noises and putting your hands close to the hearing aid during treatment to avoid buzzing.
- The patient may want to adjust or turn off the hearing aid during treatment. Inform them (show) before you start to use dental equipment.
- Remain within the patient’s visual field during treatment.
- Use the Tell-Show-Do approach, especially when using vibrating equipment. Individuals with a hearing impairment may be worried about the unknown. Watch the patient’s expression. Make sure the patient understands what the dental equipment is and what is going to happen.
- Written and illustrated materials and websites that explain upcoming procedures, dental information, and post appointment instructions can be valuable in providing additional information to individuals with a hearing impairment.

Additional information: Special Needs Fact Sheets for Providers and Caregivers

Below are references and resources which, although some are labeled for children, are very helpful for reviewing implications in adults.

References

- NIH Institute for Hearing Impaired

Additional Resources

- NIH Institute for Hearing Impaired
- ASTDD-Special Needs
- Block Oral Disease, MA
- Free of charge CDE course: NIDCR CDE (2 CDE hours)