



SELF-REPORTED HEARING PROBLEMS AMONG OLDER
ADULTS

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Annotation: Population-based epidemiological data examining the relationship between self-reported hearing complaints and objectively measured hearing thresholds in older adults are limited. Effective planning of hearing health care, including the development and implementation of adult screening programs, depends on population-based epidemiological evidence describing the prevalence of self-reported hearing complaints and their association with objectively measured hearing impairment. Hearing impairment is highly prevalent among older adults. The purpose of this study was to assess the prevalence of self-reported hearing-related problems—namely hearing difficulties, difficulty understanding speech in noisy environments, tinnitus, and hyperacusis—and to examine their relationship with measured hearing thresholds in an older population using a cross-sectional, randomly selected, unselected sample.

Key Words: Adult, hearing, hyperacusis, self-reported, tinnitus.

Purpose:

This study aimed to determine the prevalence of self-reported hearing-related problems—specifically hearing difficulties, difficulty understanding speech in noisy environments, tinnitus, and hyperacusis—and to evaluate their



association with objectively measured hearing thresholds in an older adult population.

Research Design:

Cross-sectional, population-based study without prior screening.

Study Sample:

A randomly selected cohort of 850 adults aged 54–66 years residing in Samarkand, Surkhanda rya, and nearby regions.

Data Collection and Analysis:

Participants underwent otological examination and pure-tone audiometry and completed a structured questionnaire assessing hearing-related symptoms.

Results:

The prevalence of self-reported hearing difficulties was 37.1%, difficulty following conversations in noise was 43.3%, tinnitus was reported by 29.2%, and hyperacusis by 17.2% of participants. Despite these complaints, more than half of the individuals demonstrated no audiometrically defined hearing impairment (better-ear hearing level at 0.5–4 kHz <20 dB HL). Participants reporting hearing-related problems, including tinnitus and hyperacusis, exhibited significantly poorer hearing thresholds compared with those without such complaints. Self-reported hearing difficulties were predictive of hearing impairment at higher frequencies (4, 6, and 8 kHz), particularly at 4 kHz.

Conclusions:

Self-reported hearing problems were more prevalent than hearing impairment defined by standard audiometric criteria. Additionally, perceived hearing difficulties were more strongly associated with high-frequency hearing loss (4–8 kHz) than with thresholds in the 0.5–4 kHz range, which are typically used in clinical and legal assessments of hearing impairment.

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