

Now hear this

When it comes time to crank the volume on everyday banter, there are hearing aids that won't break the bank



MDHearing aid (Bill Hogan/Chicago Tribune) (March 2, 2011)

By Barbara Mahany, Tribune Newspapers
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It's a statistic that confounds and frustrates just about anyone who works to make sure the sounds of everyday living are heard: Only about 1 in 5 Americans with **hearing loss** actually uses a hearing aid.

The stumbling blocks? The cost of hearing aids, and the fact that most insurance policies won't cover the devices that make it possible to hear a bird chirping or someone yelling across the room. Or a siren. Or fire alarm.

Typically, a hearing aid costs \$1,000 to \$3,000 (and, remember, that's per ear). According to industry statistics, the average cost of a hearing aid was \$1,601 in 2009, the latest year available.

Only 22 percent of Americans have insurance policies that will help pay for hearing aids, according to the nonprofit Better Hearing Institute. (Those with Veterans Affairs benefits have full coverage.) Insurance companies, on the whole, have never explained the

thinking behind that lack of coverage; some have actually deemed them cosmetic devices.

The new federal health care plan doesn't offer coverage either. "We tried to push for that, at least for kids," but got nowhere, said Brenda Battat, executive director of Hearing Loss Association of America. (The plan does prevent a tax on hearing retail sales, however.)

Affordable option

Dr. Sreek Cherukuri, a board-certified ear-nose-throat specialist who runs an audiology clinic in a blue-collar community in Indiana, was frustrated by the calculus of hearing-loss patients who couldn't afford to hear.

He was forever seeing patients with varying degrees of hearing loss, sending them to a free consultation with a trained audiologist — and never hearing from those patients again. Once they heard the cost of hearing aids, which quickly translates to \$2,000 to \$6,000 if the hearing loss is in both **ears**, "Those patients went home with nothing," Cherukuri said.

In 2007, when the **iPhone** came on the market, Cherukuri saw reports showing that the phone's components cost an average of \$130 to \$140. "I started thinking that if you can make a fantastic phone for under \$200, I could make a hearing aid that's pretty good for about the same price," he said.

Cherukuri is the first to acknowledge that the best option is a customized hearing aid, one that's designed and fitted to a patient. But for many hearing-impaired people, amplification of a full range of frequencies will make for a marked improvement.

Cherukuri got to work designing a hearing aid, for mild to moderately severe hearing loss, that would cost less than \$200. By summer 2009, his product, the MDHearingAid, was ready for retail.

His company claims the FDA-registered hearing aid — an analog device that comes with a volume dial — is "one-size-fits-most," amplifying the sound frequencies of the human voice. Other hearing aids in the under-\$200 range amplify only the bass, or low frequencies, and tend to amplify background noises that make it harder to hear the human voice.

Review and trial

"What he's doing is a good thing," said Dr. Charles Weingarten, an ENT in private practice for 41 years and assistant clinical professor at Northwestern University's Feinberg School of Medicine. Weingarten examined the MDHearingAid at the request of Tribune Newspapers. "It's an economic issue. Good enough is sometimes the best you're going to get."

Weingarten and other ENT physicians who looked at the MDHearingAid were quick to applaud its 45-day free trial, which allows people to find out for themselves if it works for their particular hearing loss.

The trial is important, says Cherukuri, because "it takes the brain several weeks to adjust to the hearing aid. It has to get used to the new stimulus of sound. You will hear better on Day 28 than you hear on Day 1," he said. "It's not like glasses, where the minute you put them on, you see better."

Cherukuri cautions that for patients whose hearing loss is due to nerve damage — a hearing loss referred to as one of "clarity" — the amplification will not fix that loss.

Overall, Cherukuri's prescription is one with which no doctor would argue: "See a physician and get the best hearing aid you can afford."

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Options for those who are hearing impaired

Some 36 million American adults (approximately 17 percent) report some degree of hearing loss, according to the National Institute on Deafness and Other Communication Disorders.

For the MDHearingAid, visit mdhearingaid.com. For other more-affordable options (\$295 to \$895), Weingarten, who carries a pocketful of \$30 amplifiers when he goes on medical missions to third-world countries, recommends the website hearingaidscentral.com.