

Internet Hearing Aids: Boone or Bane to the Consumer?

This expose reveals a number of issues relative to the circumvention of professional diagnosis and care when one purchases hearing aids through internet or mail order. Reader inquiries may be directed to digicarenet@aol.com or faxed to 719-676-6882.

Internet Hearing Aid Sales: Boon or Bane for the Consumer?

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Fifteen years ago, this author published an article titled "Mail Order Hearing Aids: Boon or Bane?" (Hearing Journal/1988). The conclusion at that time was, because of the enormous complexity of human hearing and an elaborate regulatory system in place to assure consumers of certain standards of care, that hearing aids obtained by mail fell far short of not only hearing health advancements, but also the legal requirements set in place to protect consumers. And now, many years later, we find the issue needing addressed, but this time around we find the rising offender are sales of hearing aids via the Internet. This, of course, frames the question in no less crucial terms, but instead adds another dimension, since Internet is a 24/7 access to an unsuspecting public.

Invalid testing via Internet

At least this time around, there is some pretension toward obtaining some kind of hearing test. Forget calibration and a sound controlled environment. However, making that leap of logic only exposes the prognosticators to a host of other regulations: ANSI, state licensing law, and scope of practice. And what about otoscopy, middle ear assessment, calibrated pure-tone and speech audiometry, a sound controlled environment, and professional audiometric interpretation? Experience tells us that it is virtually impossible to obtain the necessary information in any manner outside a properly sound-controlled environment using calibrated equipment by a professional who has demonstrated appropriate levels of competence in the testing of human hearing.

If this were not the case, consumers would be buying hearing aids out of Radio Shack and K-Mart, where mass production and one-size-fits-all takes precedence over customization and calibration. For this reason and much more, it is illegal to sell hearing aids in all fifty states without observation of many laws and regulations that are in place for the express purpose of watching out for the consumer's best interests. Manner of delivery is beside the point, although at least a half-dozen states strictly forbid distance sales (and purchases) of hearing aids. Internet sales are still "mail order" regardless the more sophisticated marketing façade.

What about the FDA Red Flags?

Moreover, there are good reasons why we have the United States Food and Drug Administration Hearing Aid Regulation, not the least of which is to assure the public health and safety. For instance, under the Red Flag conditions alone, there have been identified hundreds of otopathological conditions that require medical referral, including:

§ Tumors of all kinds, including cholesteatoma, glomus, osteoma, ulcerated squamous carcinoma, hematoma, acoustic neuroma, and vestibular schwannoma.

§ Serious, insidious infections, such as pseudomonas, candida, staphylococcus aureus, otomycosis, meningitis, or neuritis statoacoustica.

§ Undetected trauma from past accidents, such as temporal bone fracture, labyrinthine concussion, acute acoustic trauma, or Caisson disease.

§ Undiagnosed inner ear conditions that could cause sudden and complete hearing loss, such as Meniere's disease or syndrome, cochlear stroke, allergy, or ototoxicity to medication.

The list of potential oto-related danger signals, many of which get bypassed during routine physical exams, is quite long. Detection and treatment often requires the services of clinical audiologists and otolaryngologists. Hearing instrument specialists are also required to undergo extensive training to detect the "Red Flag" conditions, and to make immediate referral when any of these present during the hearing test. To intentionally bypass these consumer safeguards is not only unethical, but clearly illegal under current state and federal regulations. And that is precisely what is done through internet sold instruments.

Do these devices pose a genuine threat?

Here is a small listing of dangers---some physical, some financial, some practical---potentially involved in such sales:

§ Overamplification or misapplied frequencies to the cochlea can cause permanent tinnitus (ringing in the ears) for life.

§ Like wearing eyeglasses that are not suited to one's visual needs, the physioacoustic characteristics of an improperly fitted ear can change with the distortions and mismatches of these devices. Some changes are permanent.

§ Since they purchased these devices without benefit of the proper examinations, life-threatening conditions continue undetected and untreated, including more benign conditions, such as impacted wax, middle ear fluid, etc.

Other reasons why hearing aids obtained outside legal channels can be a detriment for the consumer are:

§ Unnecessary hearing aid purchases ostensibly to correct a loss that may be a result of a medically treatable condition.

§ If hearing aids were "tried" by the consumer in this manner, and found to be wanting (which is usually the case), it would serve to delay getting the needed help for one's hearing loss.

§ It is virtually impossible to make and fit a proper earmold without a professionally administered ear impression, including accommodation for individual neurophysiological characteristics. Every ear is different, and being off slightly can cause discomfort, loss of natural ear canal resonance, and failure to fit.

§ ANSI and FDA-required quality controls cannot be assured, making the quality of such purchases questionable at best, and substandard at worst. Under this reasoning, if one were to spend just \$100 for their Internet hearing aid, they would have spent \$100 too much!

§ Auditory rehabilitation is a complex and customized process. It requires the guidance of those who trained and equipped to do this on a one-on-one basis. It cannot be done at a distance, as some would suppose. Below, are listed some references to help the reader get a better picture of the vast body of considerations when designing an effective counseling and rehabilitative program for the hearing instrument patient.

§ This form of marketing requires no up-to-date, specialized training on the part of the merchandisers. All one needs to do is attend any of the thousands of seminars and workshops at the American Academy of Audiology, International

Hearing Society, American Academy of Otolaryngology-Head & Neck Surgeons, and many other professional organizations to find out why it is important that one's hearing professional stay on the cutting edge of the profession. To offer any less is an abrogation of professional responsibility.

In sum, Internet and mail order hearing aids are not the bargain they pretend to be. For their proponents cannot build and market a one-size fits all hearing instrument for any less than the legitimate system does, yet they often claim they can in their marketing materials.

However, the biggest difference is what is being left off: Consumer protections, professional services, and the part that is most important, an auditory rehabilitation program that helps consumers make the most of their hearing health investment. These added-value services are nothing to sniff at, and certainly, if leaving them off was a feasible method of marketing hearing aids there would be no need for the myriad regulations and well-defined protocols that were put in place to protect the consumer.

For a better picture of what true auditory rehabilitation entails, I direct readers to the website of the DigiCare Hearing Health Network at www.digicare.org. There, they'll find many more reasons why the best bargain in health care are the quality services and products of provided by America's Hearing Healthcare Team!

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Editors note: Parts of this article are also included in a multiple-authored version published by [Audiologyonline](http://Audiologyonline.com) and [HealthHearing](http://HealthHearing.com) newsletter. Reprinting is granted only by keeping credits and references in tact, and that it is used for educational purposes only.

Suggested readings

1. Durrant, J.D., and Lovrinic, J.H., *Bases of Hearing Science*, 2nd edition, Baltimore: Williams & Wilkins, pp. 248-250 (1984).
2. Chartrand, M.S., "Video Otoscopy Observation & Referral: The FDA Red Flags", *Hearing Professional*, Jan.-Feb. (2003).
3. Chartrand, M.S., and Chartrand, G.A., *The Nuts & Bolts in Solving Problem Fitting Cases*, a 12-hour continuing education course, Livonia, MI: International Institute for Hearing Instruments Studies, (2002).
4. Chartrand, M.S., *Hearing Instrument Counseling: Practical Applications in Counseling the Hearing Impaired*, Livonia, MI: International Institute for Hearing Instruments Studies, pp. , (1999).