



The Hearing Center at 1655 Carolina Ave. in Orangeburg has a certified dementia practitioner who is addressing the link between hearing loss and dementia. Chad Haynes, owner of The Hearing Center, said untreated hearing loss is the number one modifiable risk factor for dementia. Pictured at The Hearing Center are Haynes and Heather Frierson, certified dementia practitioner at the practice she's been with since 2011.

DIONNE GLEATON, T&D

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The Hearing Center has specialized in the medical treatment of hearing loss for more than 30 years in Orangeburg and has since added the services of a certified dementia practitioner to explore its link with the loss of cognitive functioning.

"We're looking at a wider range of a person's hearing because we're understanding so much more now. It's not just the fact that the person has a hearing loss that's causing them trouble understanding people, but it's a lack of stimulation going to the brain," said Chas Haynes, owner of The Hearing Center.

Heather Frierson, who started in the office as a receptionist in 2011, is a hearing aid specialist who has since successfully completed the requirements to become a certified dementia practitioner through the National Council of Certified Dementia Practitioners, or NCCDP.

Haynes said Frierson's expertise is needed, especially since untreated hearing loss is the number one modifiable risk factor for dementia.

"There's not a single part of the brain that that hearing mechanism doesn't send stimulation to. It literally affects every part of the brain. With the lack of stimulation, it just affects the brain in general. It's kind of like if you lay in bed for a long time, your muscles start to atrophy," he said.

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Haynes continued, "With the lack of stimulation, the brain doesn't exactly atrophy, but it's a similar kind of situation. In MRIs and stuff, you can actually see a person's brain shrink, and hearing loss can be a big contributor to that because that's just one more thing where they're just not getting that stimulation."

Frierson said, "Even if you put earplugs in, or hearing protection, you can still hear. It's muffled and there are things that you can do to protect from loud sounds, but nothing closes that off completely. Severe hearing loss obviously would do that, but other than something biological, there's not any way to turn that off. Sound is what our brains are used to from even before we're born, and a stimulation from that sound is being received by the brain."

Haynes said, "So we're really starting to realize and understand how the lack of stimulation just going to all different parts of the brain is really affecting things like cognitive decline that lead to dementia and that sort of thing."

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Frierson said The Hearing Center does more than just deal with hearing aids

"We do hearing testing, and our testing is a little more in depth than your average hearing test that you would have like at an ENT office. ... We're trying to figure out more than just what shows up on the graph,"

Frierson continued, "We're looking at how a person's hearing affects their understanding of speech. We're looking at how their hearing affects their ability to understand what people are saying when there's no other noise, or when in a noisy environment.

"We're at looking at things like: Do they have ringing in the ears? Are they showing early signs of cognitive decline?"

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Haynes stressed that the center does not treat dementia, but rather the hearing loss that can contribute to it

"We treat hearing loss, but we're viewing hearing loss now from a different perspective in that we're looking at it as ... one of the big risk factors for dementia. We look at it as trying to eliminate one of those risk factors. It's actually the biggest modifiable risk factor that leads to dementia," he said.

Haynes continued, "I don't want people to think, 'Hey, if I've got dementia, we can go there and they can help treat dementia.' We don't do that. We're trying to eliminate the biggest modifiable risk factor that leads to it."

Frierson said, "There's a lot of other risk factors. Having hearing loss that is untreated will oftentimes lead to things like social isolation, anxiety, depression. All of these things are also risk factors for cognitive decline and dementia.

"So treating the hearing loss is the largest thing you can do to help prevent cognitive decline, but then it also helps prevent these other things that can also contribute even further to cognitive decline."

She continued, "It's all so intertwined. We just want to make sure that that hearing loss part of it is also being treated appropriately for patients who are at risk for these types of situations."

Frierson said a hearing test is provided free at The Hearing Center

"It can't hurt to get it tested and just see where you stand. ... We recommend that if you're over the age of 55, you should be getting your hearing tested every year whether you think you have hearing loss or not," she said.

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Haynes said, "We've known for a long time that the sooner we can treat a person's hearing loss, the better it's going to be in the long run for their hearing. Now when you throw in the whole cognitive decline, then it really gets to be imperative."

Frierson said, "And a lot of that is not reversible. Once your brain starts to shrink and those neural connections are lost, a lot of times they can't be restored. So you're trying to prevent further decline. If people were aware and got treatment as early as possible, we could possibly prevent it from starting to decline."

A person's health history is reviewed before any type of testing is done.

"So if they have things like dizziness and headache, then we're going to make a referral to make sure that those things are being treated if they're not already," Frierson said.

"And then if we do have a patient that comes in and it seems like things are lower based on cognitive testing and things like that ... we can ask, "Well, have you talked to your primary physician about this? Would you like a referral to a neurologist or different type of specialist?" she said.

"We obviously can't diagnose any kind of dementia or anything like that. ... We'd just like to make sure that they're being treated from all angles and not just left out things for things to progress without anybody doing anything," Frierson said.



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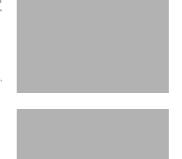


Men's Fellowship Fri, Mar 4, 2022



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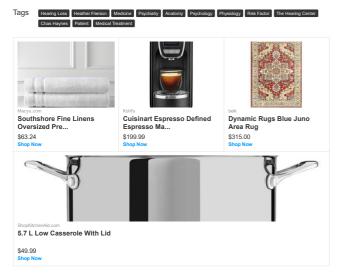


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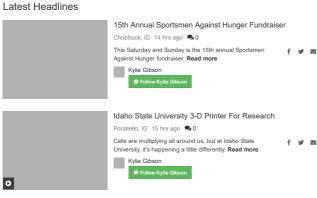
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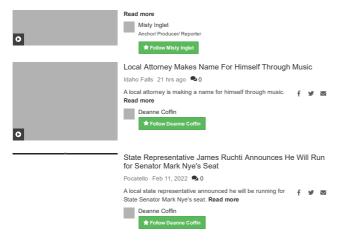


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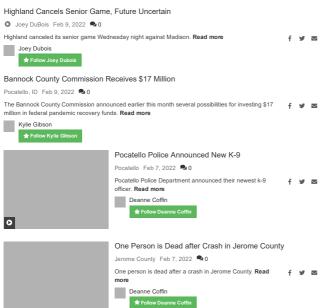
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