Invisible Disability

Mark Brogan was serving as an Army captain when he was severely injured in Rawah, Iraq, on April 11, 2006. He suffered a penetrating head injury, multiple shrapnel wounds and a nearly severed right arm when a suicide bomber set off his explosives near Brogan and another soldier, who died in the attack. It wasn’t until months later that Brogan learned of what he calls his most noticeable and problematic injury.

Debra Collins, a DAV member served 20 years in the Army — the last few suffering from an invisible disease that would leave her suffering on the floor or in an emergency room. “People thought I was crazy,” she said. “And it took years for my illness to be diagnosed.” Both veterans suffered from traumatic events that cost them their hearing and balance. And both believe that the hearing loss is their greatest disability.

“About 50 percent of veterans seen at the Washington, D.C., VA medical center suffer from some type of hearing loss; either due to age or military noise exposure” said Clinical Audiologist Tara Parson-Grant. “I see approximately seven patients a day, five days a week or about 30 to 40 patients a week,” she said. “Today, we are seeing more young veterans who suffer from hearing loss than ever before. It’s a product of the improvised explosive devices (IEDs) used in Iraq and Afghanistan.”

“VA has determined that hearing loss is a significant health care problem for veterans,” said Washington Headquarters Executive Director Barry Jesinoski. “Unfortunately, veterans
are more likely to suffer hearing loss than other population groups.”

The Hearing Loss Association of America reports the VA estimates that more than 59,000 veterans of the wars in Iraq and Afghanistan have received disability ratings for hearing loss, and the trend is increasing. The association says that sudden, noise-induced hearing loss from gunfire and explosions is the number-one disability caused by combat in the current wars. There is no cure for the type of hearing loss that affects most veterans.

Parson-Grant is a veteran who served in Iraq during 2007-2008 and in Afghanistan during 2010-2011. “I’m proud to serve my country,” she said. “I get up every day and say ‘who can I help today?’” A major in the Maryland Army National Guard, Parson-Grant said veterans of Iraq and Afghanistan suffer some of the worst hearing losses because of IEDs. “These explosions have caused a significant loss in hearing in these veterans.”

The VA’s 2011 Veterans Annual Benefits Report estimates that nearly 702,000 veterans have hearing loss, with 841,000 cases of associated tinnitus, or ringing in the ears. An estimated 1.7 million veterans have auCollins suffered from undiagnosed Ménière’s disease while she was on active duty. At times she couldn’t walk and was taken for emergency care, leaving her and doctors mystified about the source of her illness. Ménière’s disease was diagnosed after she was separated from the Army, but since she developed the disease while on active duty, it is service-connected. Ménière’s disease has no known cause or treatment, and has left her deaf in one ear. She has difficulty maintaining her balance, as well as tinnitus.
“I have terrible tinnitus that I almost have gotten used to at this point,” said Brogan, a member of Chapter 24 in Knoxville, Tenn.

“Out of all of the disabilities I accrued out of the injury, hearing loss is one of the most noticeable and, including TBI, a frequent problem for me,” said Brogan. “It is just so hard to understand what people are saying, even my wife, and she ‘gets’ it.”

Living with Hearing Loss

The first step in living with hearing loss is coping with it.

VA audiologists do amazing work helping veterans with hearing loss. “We provide diagnostic testing and hearing aid assessments, then fittings,” said Parson-Grant. “Most veterans go through a period of denial regarding their hearing loss until they come here, and we diagnose it. It’s more of a confirmation for them.” Veterans may go through a five- to seven-year period of hearing loss denial.

A recent study found that most hearing impaired people have some social and psychological problems as a result of not being able to hear. A study of baby-boomers found that they believe their relationships with their adult children are adversely affected by their hearing loss. Conversely, almost half of the adult children surveyed believe that their
Parents’ hearing loss affected their relationships. One in three young people said their parents’ hearing loss caused them to miss important things in their lives.

Veterans 85 and older sometimes seek isolation due to their inability to hear others clearly. “They grow withdrawn, isolated and watch TV at home,” Parson-Grant explained. “Sometimes we fit them with hearing aids, and they grow accustomed to them.”

Those with hearing loss strategize to offset their loss. “Some of it is conscious, or unconscious,” she said. “They learn to read lips very well, they sit where they can best hear a speaker or a movie.”

For Collins, the VA provides hearing aids, batteries, a doorbell alarm with a flashing light, an alarm clock and a smoke detector that she can see. “The VA gives me awesome service,” she said. “They take good care of me. I love the VA.”

With hearing aids Collins sometimes overhears the conversations of others. “I could hear people talking down the hall,” she said. “I didn’t like it. I felt I was eavesdropping, and it made it difficult to hear the conversation I was having.” But Parson-Grant said that’s a part of normal hearing that Collins wasn’t accustomed to noticing.

For the hearing enabled, those with hearing loss are sometimes
thought of as aloof, confused or distracted. Dealing with others can be difficult. “People joke about it or feel that I’m ignoring them,” said Collins. “A lot of people think I have selective hearing. If I go into a meeting, I have to sit in a section that will make it easier for me to hear. It takes a great amount of concentration to understand what is being said.”

Those who work or live with the hearing disabled must make concessions in order to be heard. “People who know me go around to my good [hearing] side,” Collins added. “Sometimes I have to remind people I can’t hear well, and I try to get as close to people as I can to understand them.”

“It annoys people to keep repeating themselves,” she said. “It’s never a big issue, but it’s there.”

Brogan’s hearing loss was diagnosed several months after he was wounded, leaving him with severe to profound damage to the middle-ear system that helps him regulate his balance. “My balance and dizziness were horrible,” he said. “It made physical therapy much harder, but a physical therapist at Walter Reed greatly helped me overcome the symptoms.”

He’s found that some people’s patience with him can wear thin. “The fifth time you say ‘What?’ they get angry with you,” Brogan explained.

Brogan has found that crowded places are a problem for him. “It’s difficult, because in a group, I’m lost,” he said. “Amid
background noise, I’m lost.”

“The VA gave me great hearing aids, and they work very well.” Brogan added. “I even have a remote control… that changes the volume and filters background noise in loud areas.

“It’s hard to find friends that understand what it’s like with any disability,” he said. “Everyone just assumes, ‘Hey, you look fine, you must be fine,’ which couldn’t be farther from the truth.”

Brogan knows that hearing loss limits his social capabilities. “I’m taking sign language to prepare for any future hearing loss,” he said. “The added brain injury makes me question if I heard it and understood it correctly. TBI (traumatic brain injury) is a set of issues on its own.”

His brain injury is also erasing parts of his memory. “I took a trip in 2009, and I don’t remember much about it. I don’t remember the events of the vacation. I’m losing the ability to hold on to the memories I have.”

Parson-Grant notes that current and future advances in hearing aid technology are based on improving old technology concepts. “Hearing aids change quickly,” she explained. “We are constantly getting new training in a lot of the new technologies.”

“Advances like Blue Tooth cell phones, televisions and so-
called wired rooms allow those with high-tech hearing aids to access the public address systems and bring those with hearing loss back into the hearing world,” said National Service Director Garry Augustine. “Hearing aids can be adjusted to enhance the frequencies that can’t be heard. They also can be adjusted to reduce background noise to hear conversations with those up close.”

The American Academy of Audiology issued clinical guidelines in 2010 for treatment that explores intensive audio training to change the brain, and in turn, the individual’s auditory behavior. The report concludes that reprogramming the brain to hear better with devices could offer improvements beyond relying on the devices alone.

“Right now, the technology is limited, it isn’t a complete solution,” Brogan observed. “There’s lots of rehabilitation that you can do, like speech reading. I am a member of some panels working to help veterans deal with hearing loss without technology and new techniques you can use to tell people that you have a hearing loss.

“VA gives you the technology, but they don’t tell you how to operate it,” he said. “Sometimes technology takes getting used to, and you fear further injuring your hearing. You can lose what you have left.”

“Among the problems with hearing loss is the social interaction with people,” said Jesinoski. “Those with hearing loss have to communicate to others that they cannot hear well and give others the opportunity to understand and compensate
for it.

“It is frustrating to veterans and all those around them,” he said. “It is an invisible disability more frustrating for those with hearing loss than others around them.”