UK NATIONAL SCREENING COMMITTEE

Adult Hearing Screening

24 March 2009

Aim

1. To agree the UK National Screening Committee's (UK NSC) formal policy position on adult hearing screening.

Background

- 2. At the November UK NSC the committee received and considered a document outlining a policy update relating to adult hearing screening.
- 3. The paper has been circulated widely and occasioned two responses: one from the Royal National Institute for the Deaf (RNID) and the Audiology Services Advisory Group that advises the Scottish Government on issues related to Audiology.
- 4. The RNID are of the opinion that we should go ahead and screen, in particular that we know all we need and there is no place for a RCT; that a screening programme would overcome primary care's reluctance to refer adults with hearing loss. They also say that new hearing aids will make potential low uptake "much less likely"
- 5. Comments from the Audiology Services Advisory Group focus on the fact that there may be benefit to people with milder hearing loss than 35 dB. They also comment that the main aim should be on finding an appropriate device or method of screening which would help with not just identifying, but classifying the likely hearing loss. However they are "not sure how well Audiology Departments in Scotland will cope with a potential increase in demand".

Summary

- 6. There is no published RCT in the literature and, knowing that those who take screening up and those who don't are entirely different, this remains a key issue.
- 7. The level of hearing loss, the frequency of testing and re testing, the screening test (a device +/- a questionnaire) are all questions that remain to be answered.

Recommended policy position

8. There is currently insufficient evidence to warrant a screening programme for adult hearing loss.

Recommendations

The UK NSC is asked to:

- accept the recommended policy position; ask the HTA to consider a RCT.
- agree the policy should be reviewed in three years unless there is significant new peer reviewed evidence.

Anne Mackie