Celebrating 65 Years of *The Hearing Journal*

By Fan-Gang Zeng, PhD

It goes without saying, there would be no *Hearing Journal* without the profession of hearing healthcare. When *The Hearing Journal* made its debut in November 1947 under the name *The National Hearing Aid Journal*, it aimed to serve “5,700 hearing aid dealers located in cities and towns from coast to coast.”

A lot has changed in 65 years. When *HJ* published its first issue, Harry Truman was president, busy with containing communism and rebuilding Europe. The US population was 150 million, two billion worldwide. Today, the US population has more than doubled, the world population tripled, and communism is no longer a threat.

Hearing healthcare has dramatically changed as well. A PubMed search for “hearing” revealed 97 publications in 1947 and 3,721 in 2012, an explosive 40-fold increase. The word “audiology” did not even appear in print until 1946, when it was used to refer to courses taught at Northwestern University in Evanston, IL, according to James Jerger, PhD. The American Speech Correction Association formally changed its name to the American Speech and Hearing Association in 1947. Forty people, mostly ENTs, attended the First International Conference on Audiology in Stockholm in 1948.

Two Nobel prizes that fundamentally changed audiological practice were given at about the same time, to Georg von Békésy, PhD, for discovering traveling waves in the cochlea, and to John Bardeen, PhD, William Shockley, PhD, and Walter Brattain, PhD, for inventing transistors. The first automatic audiometer, the first impedance bridge, and the first speech audiometry were also introduced. The hot research topic was loudness recruitment, attracting the attention of audiological pioneers Raymond Carhart, PhD, Edmund Fowler, PhD, Ira Hirsh, PhD, and Jozef Zwischen, ScD, to name a few.

Fast forward to the present. Seventy-eight AuD programs with more than 10,000 audiologists and an additional 15,000 hearing instrument dispensers exist in United States alone. They strive to serve the needs of the 10,000 babies born every day and the 10,000 baby boomers who will turn 65 daily for the next 18 years.

Technologies have changed how audiology is practiced today, as Harry Levitt, PhD, notes in his eloquent article in this issue. (See p. 30.) Thanks to pioneers like William House, MD, cochlear implants have now restored partial hearing to more than 250,000 deaf people worldwide. (See Dr. House’s interview on p. 32.) Diagnosis has increasingly relied on objective measures from otocoustic emission to evoked potentials and brain imaging, resulting in early detection and accurate classification of auditory disorders from the ear to the brain. Treatment has taken combined audiological, biological, surgical, and psychological approaches to address not only hearing loss but also tinnitus, dizziness, and other brain disorders from Alzheimer’s disease to autism and traumatic brain injury. The hot topic now is how to restore hearing through biological means such as gene therapy and stem cells to regenerate hair cells and neurons.

Like it or not, technologies will continue to evolve and affect our practice. Genetic testing may even one day replace audiological testing as the main tool for universal newborn hearing screening. Telemedicine and personalized hearing will provide more convenient, cheaper, and perhaps better service than the present practice model.

Among these changes, our core value remains delivering the best service to our patients, and that should never be changed. We should open our arms and minds to embrace technological innovations.

Through it all, *The Hearing Journal* has been committed to helping you stay abreast of the ever-changing field while preserving the core values to better serve you and the patients you treat. That is a mission we take seriously. It is with great honor that *HJ* covers the news of hearing healthcare, and we pledge to continue bringing you the most important news and advances in the field.

Here’s to the next 65 years!