Hearing loss is one of the most common chronic health conditions in the elderly population with important implications for patient quality of life. The diminished ability to hear and to communicate is frustrating in and of itself, but the strong association of hearing loss with depression and functional decline adds further to the burden on individuals who are hearing impaired. Hearing loss can limit communication skills: not to hear means not to understand what is being said. Despite the prevalence and burden of hearing loss, hearing impairment is largely underdiagnosed in older persons and undertreated. The reason for this is that one of the most conspicuous signs of a hearing loss is that it cannot be seen! Actually, this is the reason why deafness does not receive the necessary attention. Too often, the public and still too many health care professionals underestimate the dramatic effects of deafness. Novel strategies should be explored to make screening and early intervention a feasible part of routine care. Project AHEAD III has been specifically designed to: Provide evidence of the effects of hearing impairment in adults and particularly in the elderly. Analyse costs associated with the implementation of integrated large scale programs of hearing screening and intervention in the elderly. Provide quality standards and minimum requirements for screening methods and related diagnostic techniques. Develop guidelines and recommendations on how to implement successful screening programs to be tuned to the local, social, and economical conditions of a country.

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