

Hear the News!!!

Boise 489-4999
Nampa 489-5950

Eagle 489-4975
Ontario (541) 881-0970

Meridian 489-5999

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Hearing and Balance Centers *at the Elks* is Expanding



This fall, the Hearing and Balance Centers *at the Elks* will be opening a new clinic in Eagle, Idaho. The clinic will be located on the second floor of the new St. Luke's Eagle Regional Medical Center on State Street.

Our Eagle office will be providing a variety of hearing and balance services including:

- Comprehensive pediatric and adult hearing evaluations
- Hearing aids and related services
- Osseo-integrated implant (baha) assessments
- Assistive listening devices
- Central auditory processing disorder (CAPD) evaluations and treatment
- Auditory Brainstem Response (ABR) evaluations
- Electro- and Videonystagmography (ENG/VNG) evaluations
- Vestibular assessment and treatment for Vertigo, dizziness and motion sensitivity
- Balance assessment and treatment for disequilibrium and falling
- Computerized Dynamic Posturography assessment and treatment.

April Ward, M.S., CCC-A, will be relocating as the Eagle Clinic Manager/ Audiologist from the Nampa office. Linda Owen, Vestibular Certified Physical Therapist, will also join the new Eagle team.

Clinic Hours: 9:00 a.m.– 5:00 p.m., Monday through Friday

New Developments at the Hearing and Balance Center

In September, a large group of our staff participated in the annual Women's Fitness Celebration.

On October 18 and 19, Hearing and Balance Centers at the Elks will be at Idaho Expo Health Fair in Garden City.

Debbie Baerlocher will be presenting at the Idaho Hospital Association Conference in October.

In October, Karrie Weightman will be presenting at the Inter Mountain Area Speech and Hearing Conference in Salt Lake City.

In October, Erika Blanchard will be presenting at the Family Support Conference in Raleigh, NC.

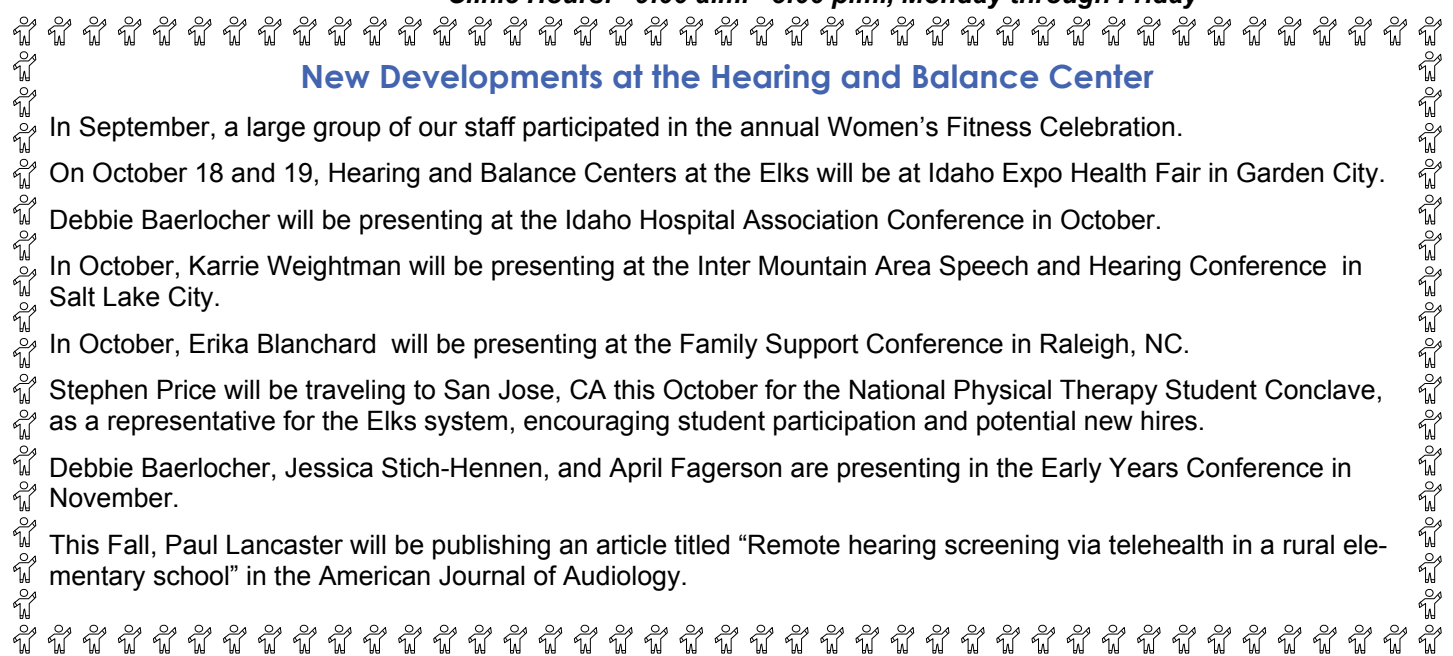
Stephen Price will be traveling to San Jose, CA this October for the National Physical Therapy Student Conclave, as a representative for the Elks system, encouraging student participation and potential new hires.

Debbie Baerlocher, Jessica Stich-Hennen, and April Fagerson are presenting in the Early Years Conference in November.

This Fall, Paul Lancaster will be publishing an article titled "Remote hearing screening via telehealth in a rural elementary school" in the American Journal of Audiology.

INSIDE THIS ISSUE:

- 1 Hearing and Balance Centers expansion to Eagle
- 1 New Developments at the Hearing and Balance Centers
- 2 Part Three: A patient's story about his journey with cochlear implants
- 3 How do we balance?
- 3 Hearing aid Tax Credit



A patient's story about his Journey with Cochlear Implants: Part Three

This is the final installment of our feature story written by a Hearing and Balance Centers patient, Tom. His story began in the April 2008 newsletter.



After a month of anticipation, I went back to the Elks and Dr. Hoffman activated or turned on the implant. (The implant has two main pieces: the part that was implanted inside my head and the part that I wear on the outside of my skull, attached by a magnet.) I had been told before the activation that although I would be hearing sound, the sounds themselves would not be what I was expecting. But then, I am hearing out of an electrical device and sound is bound to be different. The world of hearing came back; but people's voices sounded like chipmunks. Johnny Cash sounded like Alvin from Alvin and the Chipmunks! Yet I was hearing sounds that I hadn't heard in years! The sounds of water dripping, my cat purring, the crunch of gravel under my feet when I went for the paper in the morning; and the realization that this is a noisy world and I was becoming part of the hearing world, with confidence, again.

A few days after the activation, I went back for a mapping, or adjustment, of the implant. Two weeks later, another remapping was completed. I was told I needed to come in often in the first year as my brain would be adjusting to sounds constantly and the implant would need to be remapped to keep up with my brain. Dr. Hoffman checked my hearing as she did during the initial test in December, but this time with the implant, not my hearing aids. I was hitting 90 percent on word recognition under ideal conditions. What an improvement!

The most important aspect of this whole journey has been hearing human voices. I am now able to carry on a conversation with my daughters. My wife no longer has to repeat herself multiple times. Sometimes I have to remind her that I can understand and that she doesn't have to repeat or be my ears all the time. However, if she is running water and talking with her back to me, I still cannot hear her well, but then few could understand under these conditions. I had given up going to several of the organizations I belonged to for many years. Gradually I started attending again – alone, without my wife to interpret everything. I have to pay particular attention to what being said and use lip reading, but that is just good listening practice. I participate in the meetings with suggestions and comments. I can go to a restaurant and hear what the waiter is saying. The implant has different programs that can reduce much of the noise and still hear people at a close range. I am continually experiencing a greater degree of independence.

About a month after the activation, my wife and I went to an outdoor concert. This was something I would have avoided in the past but I needed to try this new miracle for my ear. To my surprise I was able to hear individual instruments and actually enjoy the music! Although music is still a problem at times, the rewards outweigh the disadvantages. I find the more instruments that are playing, the more difficult it is to have a rewarding experience. We went to another full instrumental concert and the results were like hearing static. It seemed there were too many sounds for the implant to adjust to. Even after several months, there are times music is difficult to listen to and other times the sounds come through very clearly. I've been told that music is something that takes time and probably is the last to complex sound to learn to hear well.

I'm surprised at what I have been missing for so many years. Every day I'm gaining new sounds, confidence and the experience in being part of the hearing world. I work with a sound technician who has run sound for some of the programs for which I am responsible. In the past I have missed almost all of what was being said during the program, even in ideal conditions. The last event he did sound for I was able to hear and understand. Yes, understand what was being said, not just hear muffled sounds. I was talking to him after the event and he asked how I was doing with the cochlear implant. I told him how pleased I was that I was able to really enjoy the evening. The most gratifying comment he made was, "Welcome back." How very appropriate!



How Do We Balance?

Our balance system is a very complex interaction between multiple systems within our body. We often take balance for granted when we are healthy and normal. We do not think about what all is involved in maintaining balance for every day activities of walking to the mail box, showering, or preparing dinner, until we have a problem. However, if we have injury, illness, or changes from aging or inactivity, our balance can decline. We can become very cautious and fearful walking to the bathroom in the dark or walking across the yard.

Maintaining balance requires sensation, brain processing, and muscle responses.

First, let us focus on sensation. We have three primary systems that provide sensory information about our balance. They are the musculoskeletal, visual, and vestibular (inner ear) systems. Our musculoskeletal system has receptors in the joints and muscles that detect very subtle movements for body awareness. We receive information from our vision (eyes) about our environment, such as obstacles in our path, stationary versus moving objects, and changes in surface, such as carpet to linoleum. Our inner ear or vestibular system provides information regarding acceleration of motion in any direction. Information to our brain from our inner ear should match from each side. When damage occurs on one side, the mismatched signals sent to our brain can cause confusion, dizziness and/or sense of imbalance.

Secondly, the information from our sensory systems is sent to our brain to be processed and be part of the “big picture” of our body movement. Our brain then decides how to react to the input and sends signals out to our muscles to help us regain our balance. For example, if you were to start to fall over backward, you might feel increased pressure on your heels (musculoskeletal); notice you are getting farther away from an object in front of you (visual); and a sense that you are moving backward (vestibular). Each sense gives a little different perspective of the same problem to our brain. A response our brain might generate is to flex forward at the hips, or use the muscles in the fronts of our shins to pull our body forward again over our feet, and regain upright posture. Impairment of any one of the above sensory systems can lead to balance difficulties.

Balance is a very complex task that requires integration of many of our systems within our body. One tool our therapists use to assess balance is the Smart Equitest® system. If you have concerns about your balance, or are fearful of falling, please contact one of our clinics and ask about a complimentary balance screen. One of our therapists would be happy to assist you.

Please Help us in Supporting the Hearing Aid Assistance Tax Credit Act – H.R. 2329/S. 1410

Hearing loss affects over 30 million Americans or 1 in every 10 people; in fact, it's the second most common birth defect. Despite these staggering numbers and the fact that hearing aids could treat 95% of all hearing loss, Medicare and most insurance policies expressly exclude coverage, making treatment an expensive endeavor. The Hearing Aid Tax Credit (H.R. 2329 and S. 1410) is legislation drafted with these real concerns in mind. If enacted, it would provide a \$500 tax credit per hearing aid available once every 5 years for dependents and for those aged 55 and older.



Hearing aid treatment can result in unexpectedly high costs for the average American. The tax credit would help millions of people seeking hearing aid treatment since \$500 can make the difference when deciding whether you can afford treatment. The tax credit has wide bi-partisan support, is supported by nearly every hearing health organization and advocacy group, and addresses a real and too often ignored healthcare need. Your support is needed, however, to let your Senators and Representative know that the Hearing Aid Tax Credit would make a real difference in your life. So please, contact your Congressmen and tell them how the Hearing Aid Tax Credit could help you.

Please visit the website: <http://www.hearingaidtaxcredit.org/>. There you will find more information about the tax credit as well as a link to contact your congressmen. You have the opportunity to personalize your letter and help strengthen the support for this bill.

Address Label



Sounds Tasty!

Did you know that the sound of food in your mouth is as important as the look, taste, and smell of food? How food sounds when you bite into it plays an important part in deciding whether or not you like it. Studies have shown that there are massive bursts of 'ultrasound' generated during that first second of biting into crunchy food. However, these sounds are beyond the range of human hearing...which is a good thing because they would damage our ears if we did hear them! The decibel level is enormous, yet we do not detect it.

The discovery of these ultrasounds has led food manufacturers to study them in pursuit of perfect crispy/crunchy textures. A panel of trained tasters is used to collect the ultrasound recordings. Interpreting the sound waves is easy; the more peaks, the crispier the food. The research also has shown that the human tasters have an innate ability to analyze the ultrasound and were as accurate as machines that are typically used. The human ears and mouth were just as good at analyzing the information.

The next time you bite into a potato chip, stop and listen, your food may be talking to you!

Source: www.medicalnewstoday.com
