Dr. Jane Madell Focuses National Spotlight on Team Approach to Managing Children with Hearing Loss

Dr. Jane R. Madell, PhD, CCC-A/SLP, Cert. AVT is Director of The Hearing, Speech, Language & Learning Center at Beth Israel Medical Center; Co-Director of The Beth Israel/New York Eye & Ear Cochlear Implant Center; and Professor of Clinical Otolaryngology at Albert Einstein College of Medicine. Dr. Madell has been a pediatric audiologist, speech-language pathologist, and auditory verbal therapist for more than 40 years, she is nationally renowned for her wisdom and compassion in working with young children who have severe and profound hearing loss, selection and management of hearing aids and cochlear implants, evaluation of difficult-to-evaluate children, including children with autism and other developmental disabilities, and evaluation and management of children with auditory processing disorders. Dr. Madell has written two books, 17 book chapters, and numerous journal articles. She is a frequent speaker to professional and parent groups around the world, including recent presentations at the International Center for Hearing and Speech in Warsaw, Poland.

On May 3, during National Better Hearing and Speech Month, Dr. Madell made an online presentation on “Maximizing Listening and Learning.” This presentation took place as part of The Cochlear Corporation’s online Habilitation Outreach for Professionals in Education (HOPE) to support educational mainstreaming of children with cochlear implants. For a full schedule of upcoming topics, visit... www.cochlearamericas.com/americas/support/291.asp.

On May 4, Dr. Madell and cochlear implant surgeon George Alexiades, MD, joined in a live discussion about pediatric hearing loss on Sirius Satellite Radio’s talk show, “Healthy Kids with Dr. Ben Kligler.” The show is featured from 1-2PM, on Channel 112 via Martha Stewart Living, with pediatrician Benjamin Kligler, MD, and holistic nurse and radio health educator Barbara Glickstein, RN, MPH, MS, both of Continuum’s Center for Health & Healing. Dr. Madell spoke about how effects of hearing loss in children should not be underestimated, and emphasized values of a team approach, including the otologist, audiologist, auditory therapist, educator, and the family, described by Dr. Madell in her 1998 book: Behavioral Evaluation of Hearing in Infants and Young Children.

On June 27, Dr. Madell will join with other experts from The Beth Israel/New York Eye & Ear Cochlear Implant Center to present “The Team Approach to Managing Children with Hearing Loss” at The 2006 Convention of the Alexander Graham Bell Association for the Deaf and Hard of Hearing in Pittsburgh, PA. In addition to Dr. Madell, participants include Ronald H. Hoffman, MD; Educator Coordinator Susan Cheffo, MS, and Educator Audiologist Lois Heymann, MA, CCC-SLP. This course will use a case presentation method to discuss the team approach to maximizing functioning for children and development of cognitive abilities that promote educational success. For information about this conference, visit... www.agbell.org

Beth Israel/New York Eye & Ear Cochlear Implant Center Staff Member Receives AG Bell Grant

The Beth Israel/New York Eye & Ear Cochlear Implant Center received a grant in the amount of $15,000 from the Alexander Graham Bell Association for the Deaf to assist in training audiologists to work in the area of cochlear implants. This grant enabled the Center to hire Myriam De la Asuncion, Au.D., CCC/A, who received her doctorate from the University of Florida. This grant has allowed her to work with children and adults pre- and post-implantation, and with children with multiple disabilities, bilateral implants, and auditory neuropathy/dysynchrony. It has also enabled her to participate in clinical research projects and trials conducted in the Cochlear Implant Program. The grant also has offered the opportunity for Dr. De la Asuncion to work closely with educators, speech/language pathologists, and teachers of the deaf in the habilitation and extensive management of the child following the implantation process. Her interests are in the clinical treatment and management of children and adults with hearing aid amplification and cochlear implants.
**Fun Events Will Benefit The Children’s Hearing Institute**

On June 8, from 6:30 to 9:30 PM, the Young Professionals of The Children’s Hearing Institute are sponsoring International Wine Tasting Under the Stars, 2006, a fundraiser on the 51st Floor Roof Terrace of the Time Warner Center. Last year’s wine tasting, spearheaded by Jason and Doug Boxer, Jonathan Yormak, and Allison Kunis in the same glamorous venue, was attended by more than 225 young adults representing the fields of business, finance, fashion, food and wine, the arts and philanthropy. The event raised more than $37,000 to support CHI-sponsored research and educational programs. This year’s co-chairs, Lisa Weinberg and Scott Etess, say they anticipate another sell-out crowd at this popular event. Tickets are $125 per person in advance; $150 at the door.

On September 13, from 6:00 to 8:00 PM, Kleinfeld Bridal and The Needlers Foundation are generously co-sponsoring An Evening at Kleinfeld, a special event to benefit The Children’s Hearing Institute. Join us for a cocktail reception and sneak preview of Kleinfeld’s autumn evening couture collection in the fabulous, new flagship Kleinfeld store located at 110 West 20th Street (between Sixth and Seventh Avenues). Kleinfeld owners Ron Rothstein and Mara Urshel are offering the lucky Raffle Prize Winner a spectacular $10,000 evening dress custom-designed by Pnina Tornai, Israel’s leading bridal and evening designer. The Needlers are providing Stefan Blake jewelry for the ladies gift bags. Tickets are $250 per person. For more information about these events, call us at 212-614-8380 or visit [www.childrenshearing.org](http://www.childrenshearing.org).

**The Children’s Hearing Institute Announces “Hearing Hero Awards”**

Do you know a special someone who has gone above and beyond the required to help a child, teen or adult who has hearing loss? The Children’s Hearing Institute is interested in receiving your nominations for our new “Hearing Hero Awards.” We plan to initiate this series of awards beginning autumn 2006, and we need your ideas. We would like to hear your story if you know a special teacher, audiologist, speech-language pathologist, or doctor who has gone out of his or her way to assist a child with hearing loss; a sibling who is especially thoughtful to a brother or sister; a parent who is gracefully meeting multiple challenges; or someone in your community, like the Verizon employee who took such care to assist cochlear implant recipient Susan Cheffo, Coordinator of Educational Services, with her cell phone needs. Send us your nomination in writing, with a brief paragraph stating why your nominee is deserving of recognition. Awards will be cited in our Echoes newsletter and on our website...[www.childrenshearing.org](http://www.childrenshearing.org). Contact: Carol Bohdan, Executive Director, The Children’s Hearing Institute, 310 East 14 Street, New York, NY 10003 fax 212-614-8259 e-mail: cbohdan@nyee.edu. We look forward to hearing from you!

**Help Children Who Are Hearing-Impaired With CHI Note Cards...Gifts That Give Back**

Looking for a way to help spread awareness about children’s hearing loss? Consider CHI’s note cards featuring original artwork by international artist Shoshannah Brombacher Miller: “Beethoven – The Spiral of Sound.” These high-quality, glossy finish note cards are packaged in sets of ten, with envelopes, at $25 per set, including shipping. Your tax-deductible purchase helps transform the lives of children who are deaf or hearing-impaired. To learn about the symbolism behind the artist’s dramatic work, visit our website: [www.childrenshearing.org](http://www.childrenshearing.org) To order note cards – perfect for any occasion, all year round! call the Institute: 212-614-8380.
According to a Johns Hopkins University study published in the *Archives of Otolaryngology/Head and Neck Surgery*, December 2005, age has no effect on outcome after cochlear implantation among people over 65, leading researchers to conclude that elderly patients “should not be discriminated against in assessments for cochlear implant candidacy.” To help clarify the effect of age on outcome, Dr. John K. Niparko of Johns Hopkins, and colleagues, looked at 749 people who had undergone the procedure and ranged in age from 14 to 91 years. The team found a wide variation in postoperative “word scores” across age groups. Although those 65 years of age and older had a 4.6 percent lower score on postoperative monosyllabic word recognition tests, this difference was not significant, the researchers note, and may not be “clinically detectable.” Longer duration of deafness was typically tied to worse performance on word recognition tests. However, among people who had been deaf for longer than 25 years, the older implant recipients scored higher than younger patients. Researchers say this suggests that variables beyond age may be involved in implant outcome, such as early language learning and residual hearing. “A foundation of central auditory processing in the older cohort,” Dr. Niparko’s group offers, “may actually mitigate the disadvantage of advanced age at implantation, build on adaptive skills, and help explain the encouraging results of this study.”

**People Age 65 and Older Are Good Candidates for Cochlear Implants**

On April 23, The Children’s Hearing Institute sponsored *A Family Reunion for Children and Adults with Cochlear Implants* at the Fieldhouse at Chelsea Piers. More than 200 cochlear implant recipients and their families met and shared success stories while enjoying a fun afternoon of games, entertainment and refreshments. “It was very gratifying to see so many of our Cochlear Implant Center patients sharing their personal triumphs in school, in sports and in activities they love,” says Hearing and Learning Center Director and Beth Israel/New York Eye & Ear Cochlear Implant Center Co-Director Jane Madell, PhD. “We thank our Parents Committee for helping us introduce guests to each other so they could network and exchange information.” The Committee included: Carrie and Kris Almskog, Brenda Cotsen and Jeffrey Benjamin, Stacey and Jamie Blecher, Edna and Tom Curley, Hayley and Adam Foster, Betsy and Chip Lee, Shoshannah and Arthur Miller, Eileen and Brian Riano, and Beth and Vincent Trama, all of whom have children who are thriving in mainstream schools with cochlear implants and/or hearing aids.

**Olympic Gold Medalist Brings International Attention to Pediatric Deafness**

Vonetta Flowers is the first black athlete (male or female) – from any country – to ever win an Olympic Winter Games gold medal. Together with driver Jill Bakken, the pair took USA Gold for Women’s Bobsleigh at the 2002 Winter Olympics in Salt Lake City. That same year, Ms. Flowers delivered twin boys, one of whom was born deaf due to an under-developed nerve connecting his ear to his brain. In December 2005, the three-year old child received an auditory brain stem implant – which is not approved for children in the U.S. – in Italy. Electrodes were implanted in the hearing area of his brain. Learn more about Ms. Flowers’ inspirational story by visiting vonettaflowers.com and/or reading her book: “Running on Ice: The Overcoming Faith of Vonetta Flowers.”
CHI Sponsors Education and Awareness During May’s National Better Hearing and Speech Month

May 1: CHI sponsored the Spring Educators Conference: “Bilateral Cochlear Implants: From Research to Practice,” focusing on determining candidacy and surgical issues for bilateral implants; comparing training protocol for simultaneous vs. sequential bilateral implants; understanding hierarchy of auditory skills training for bilateral implants for young children, pre-teens and teens; determining when an FM system is appropriate for the second implanted ear; understanding bilateral hearing vs. binaural hearing in children and adults with cochlear implants; and discussing benefits vs. interference from adding hearing aids to the non-implanted ear. Organized by Susan Cheffo, MS, the conference featured speakers Jane Madell, PhD CCC-A/SLP, Cert. AVT; Ronald Hoffman, MD; Simon Parisier, MD; George Alexiades, MD; Ruth Litovsky, PhD; Rebecca Kooper, AuD; Lois Heymann, MA; and Elizabeth Ying, MA.

May 2: CHI sponsored the Parents Workshop: Literacy: Ways to Encourage the Love of Reading.

May 6: CHI was a Gold Sponsor of the first annual Walk 4 Hearing, a six-site walkathon organized by the Hearing Loss Association of America to increase awareness about the causes and consequences of hearing loss and to raise funds to provide information and support for people with hearing loss. The local New York City chapter’s event took place in Franklin D. Roosevelt State Park in Yorktown Heights. The former name of the Hearing Loss Association of America is Self Help for the Hard of Hearing. For further information about future walks and the Association’s other initiatives, visit... www.shhh.org

May 13: We underwrote signing and open captioning for “Over the River and Through the Woods,” the 21st special performance designed for deaf and hearing-impaired patrons of The Wilton Playshop in Wilton, Connecticut. For information about these special performances, visit... www.wiltonplayshop.org

Concern about iPods and Hearing Loss Reaches Congress and National Institutes of Health

In March, Apple released a software update for iPods enabling parents to use a combination lock to set the maximum decibel level for their children. Apple also posted information online at www.apple.com/sound on how to use this new feature to limit long-term hearing damage, including advice to: – “Listen responsibly” – “Think about the volume” - “Keep track of time.” This move followed a torrent of media attention, and at least one lawsuit brought against Apple by a Louisiana man claiming that Apple’s iPod music player can cause hearing loss in people who use it. In December, The American Speech-Language-Hearing Association issued a public awareness warning that portable music players set too long at high volumes could potentially induce hearing loss that might “not be noticed until too late.” In January, The Wall Street Journal (“Behind the Music: iPods and Hearing Loss”), and the Washington Post (“Reality check on mobile music, hearing loss”), reported that hearing specialists at House Ear Institute, Children’s Hospital Boston, and the American Academy of Audiology, are starting to see teens with signs of noise-induced hearing loss that would not typically emerge before middle age.

“The researchers determined the exposure limit for safe headphone listening is one hour a day with the volume no higher than 60%. If you listen for more than an hour….turn the volume below 60%....If you have to remove the headphones to hear people talking to you, it is too loud.” The story cites two head-set styles that help alleviate strain on the ears: “sound-isolating earphones” and “noise-canceling headphones” made by Panasonic, Bose, Sony, Etymotic and Shure. Also in January, U.S. Congressman Edward J. Markey (D-MA), sent a letter to James F. Battey, Director of the National Institute on Deafness and other Communications Disorders, National Institutes of Health, requesting review of available scientific information on the impact of portable music players, including safe volume limits and exposure time, ways to determine if listening levels can cause damage, and evaluation of ear buds, earmuffs and headphones, as well as sound-isolating headsets. For a copy of Congressman Markey’s letter, visit... www.markey.house.gov

Recent Courses, Presentation and Publications


Attorney with Hearing Loss Makes Leap of Faith

We received the following essay from Jonathan Berger, an attorney working in Manhattan. Mr. Berger is the husband of educational audiologist Meredith Berger, MS, of The Beth Israel/ New York Eye & Ear Cochlear Implant Center.

“For several years I had been contemplating getting a cochlear implant even though I functioned extremely well as a bilateral analog hearing aid user. My audiogram indicated that I had a severe to profound hearing loss. People were amazed at how well I functioned in my extremely auditory work environment, on the telephone, and in social situations. Even my wife, a teacher of the deaf, was shocked when she saw my audiogram and realized how deaf I am. But the realities of my hearing loss and the work and sweat required to keep up were wearing me down.

As a result of my cochlear implant investigation, which one might describe as a “nationwide manhunt,” there were a few lingering questions. For instance, in terms of the functional aspect of the implant, no one could predict how much I would benefit from the implant. Would I be able to adapt to this “mysterious” sound, which implant recipients were unable to describe clearly to me? Would I be able to hear people without reading lips? Would music sound different?

No matter what, the decision to get an implant was largely a leap of faith. I had come to terms with all of the potential risks and benefits of the implant on my hearing, my health, and my life. After all, life is about taking chances. When my parents were confronted with my hearing loss when I was a baby, my renowned neurologist also diagnosed me as being possibly mildly retarded. My parents refused to accept that diagnosis and instead decided to take a leap of faith by placing me in a school that specialized in teaching children with learning disabilities. Thanks to them, I did well and enrolled at a mainstream high school and subsequently at Carnegie Mellon University. In law school, I was contemplating becoming a trial lawyer. Despite people’s concerns about my being able to function in a courtroom, I decided to take a leap of faith. With wonderful support from my office, I am now a successful trial lawyer.

After I was implanted with the Nucleus 24 cochlear implant, the adjustment was slow. Armed with my native New York City impatience and determined to push ahead, I began auditory verbal therapy with Amy Grillo of City Sounds of New York. Gradually, the mystical powers of the cochlear implant started taking shape. More and more, I came to grips with New York City being a very noisy city. Before being implanted, I even advertised on a roommate finder service that my apartment was on a very quiet block. Now when I sit in the living room in my apartment, I can hear dogs barking, breaks squealing from passing buses, children playing, and during a recent snowstorm, the painful sound of the sidewalk being shoveled in front of my building. Before the implant, I had no idea how noisy my block could be.

More importantly, the ability to hear and interpret the sound of words without reading lips started to blossom. I was able to hear a whole conversation in the car with my father sitting in the driver’s seat and my wife sitting in the backseat behind me. Professionally, it has become easier for me to function in the courtroom. I used to rely on an old Comtek FM system for trials in which I would wear three different receivers at once while one transmitter was for the judge, one for the other lawyer, and one for picking the jury or for the witness. A court officer even commented that I resembled a suicide bomber with the three receivers and wires all over me. To my great relief, Rebecca Kooper introduced me to a new FM system provided by Phonak, which would only require me to wear a boot on my implant. Recently, I was able to hear a small amount of a traffic report on the radio. Every time I make progress with the implant, I pat myself on the back for taking that leap of faith. I am thankful to have Dr. George Alexiades, Rebecca Kooper, Nicole Sislian, and the wonderful staff at The Beth Israel/New York Eye and Ear Cochlear Implant Center as part of my support team to continue to make more leaps of faith.”
The following story written by Lydia Denworth, is featured in the April 10, 2006 issue of Newsweek magazine. It highlights the developmental success of Alex Denworth, who received a cochlear implant at The New York Eye & Ear Infirmary Cochlear Implant Center December 2005. His surgeon was Children’s Hearing Institute Founder, Simon C. Parisier, MD., who says he is delighted with Alex’s progress.

The Sun Has Finally Come Out for Alex
With his new cochlear implant, our son is able to talk and sing. The transformation is miraculous.

My son Alex told me about his day recently. He played cars with Max and Aidan, sang the “Mr. Sun” song and danced—a typical day for a 2-year-old. His report, however, was anything but routine. It was the first real conversation we had ever had. Alex is hearing-impaired. Every word he utters is hard-won, but his battle got a lot easier a few months ago when he received a cochlear implant.

The success of the implant marks the first time in a year that he has done better than expected, not worse. The process of uncovering Alex’s hearing loss was long and frustrating—like falling down steps in slow motion. Now we’re at the bottom of the stairs, but we’re looking at where we came from, getting ready to climb back up.

We live in New York, a state that requires newborn hearing screenings, which Alex passed. But at 16 months, he had just started walking and could say only “hi,” “bye” and “Mama.” He qualified for physical and cognitive therapy, but not for speech. At 18 months, when he had no more words, we went for the first hearing test. Alex failed, but his ears were full of fluid. We spent the next two months trying to clear up the fluid for a new hearing test.

You’d think it would be obvious that he couldn’t hear well, but it wasn’t. He answered to his name, he reacted to music and he compensated well by using visual cues. His mistakes were subtle, like holding up his hands when you held out a washcloth and said you wanted to wash his face.

Then one January night in 2005, his brothers heard their father’s key in the door and ran to greet him. Alex didn’t react until I tapped his shoulder and pointed. Then he tore down the hall into his Dad’s arms. My heart sank. In February, after tubes had cleared up the fluid, tests showed that Alex also had underlying nerve damage that had caused moderate-to-severe hearing loss in both ears—he could hear a motorcycle, but not a vacuum cleaner; normal conversation sounded like whispers.

He had never heard the lullabies I’d sung or the “I love you’s” I’d murmured. I felt I had failed him by not figuring it out sooner. It was a relief, though, to finally have an explanation for what he couldn’t do. No matter how many times I read “Good-night Moon,” he was never going to be able to point to the cow jumping over the moon if he couldn’t hear the word “cow.” We were told he could catch up. In March, he got hearing aids, and in April, he started speech therapy five days a week.

In June, a CT scan revealed that Alex had congenitally deformed cochleae. He also had a condition that meant things could get worse: a bump on the head could cause him to lose his remaining hearing. “It might never happen,” said our doctor. But by fall, he had lost all hearing in the right ear. I was in a daze for a week. I hadn’t realized how fiercely I’d been clinging to the “moderate” diagnosis.

We started talking about cochlear implants. Unlike a hearing aid, which amplifies sound, an implant digitizes sound and sends it via magnets and electrodes directly to the brain. Alex’s vocabulary had grown from five words to more than 200 in six months of using hearing aids, but he wasn’t saying sounds like “k” or “t” at all. (“Come, Tom” sounded like “Um, Om.”) If testing proved that Alex wasn’t hearing high-frequency sounds like k and t, he could get an implant.

With a wrenching switch of emotional gears, my husband and I immediately hoped Alex’s hearing would be declared bad enough to qualify. The success stories amazed us: implanted children in mainstream classrooms speaking beautifully, nearly indistinguishable from hearing classmates.

Alex had his surgery in December, making him one of approximately 100,000 people worldwide who use implants (up from 5,000 in 1990). After a month, the external parts were turned on—almost a year to the day he didn’t hear his father at the door.

We’d been warned it would take months to see progress, but the next day Alex said “cake” complete with the initial “k” sound. Then he pointed to “Blue’s Clues” on the TV and said “mailbox” on cue. He has new words and sentences nearly every day. The combination of his anatomy, his residual hearing and the language he already had made him ideal for this device.

Years of speech therapy, hearing tests and doctors loom ahead, but for the moment, I am content to marvel at the gift my little boy has been given. When he finishes telling me about his day by singing a shaky version of “Mr. Sun,” no lullaby has ever sounded sweeter to my ears—or his.

Denworth lives in New York City. © 2006 Newsweek, Inc.
The Beth Israel/New York Eye & Ear Cochlear Implant Center and Hearing & Learning Center

- Beth Israel Center Coordinator: Lorie Singer, MBA, 212-844-8448
- New York Eye & Ear Center Coordinator: Yvette Sarante, 212-614-8370

Contact Us
If you have questions or would like to share a personal story with us, contact:
Carol L. Bohdan, Executive Director, The Children’s Hearing Institute
212-614-8261, cbohdan@nyee.edu
Visit our educational website: www.childrenshearing.org