

## CHAPTER CALENDAR

**Chapter and Board meetings held at:  
Weingart Center, 5220 Oliva Ave, Lakewood 90712**

**July 10, 2014** - Chapter Meeting 6:30—8:00pm  
Report from the National Convention

Refreshments provided by: Gail Morrison, Joyce Bowlby,  
Betty Rainey and Eleanor Palmer. *THANK YOU!*

**July 23, 2014** - HLAA Board meeting, 12:30 pm at  
Weingart.

**Lip Reading Practice** – on summer break, will resume  
September 8.

**Lip Reading Class** – on summer break, will resume  
September 3.

**HAT Committee and Demos** – on summer break, will  
resume in September.

## **STEM CELL THERAPY**

*reprinted from the **Stanford Initiative to Cure Hearing Loss***

**What if doctors could grow a new working inner ear from a person's own skin cells? Or repair the damaged inner ear from within?**

Solving this profound mystery is the driving force behind stem cell research and the promise of tissue engineering in otolaryngology. While hearing aids and cochlear implants can provide good recovery of hearing function, the development of a biological method to repair the damaged cochlea has the potential to restore normal hearing without any type of prosthesis.

One approach to restore hearing might be to surgically place stem cells within the cochlea in such a way that they would fuse with the remaining cochlear structures and develop and function as hair cells. Scientists believe this is a viable approach because, unlike most organs that are destroyed by disease, the inner ear remains structurally intact—only the hair cells are lost.

By mimicking the steps involved in the formation of embryonic mouse ears, Stanford scientists have produced stem cells in the laboratory that look and act very much like hair cells, the sensory cells that normally reside in the inner ear. If they can generate hair cells in the millions, it could lead to significant scientific and clinical advances along the path to curing deafness in the future.

Currently, [the Stanford] research team is working toward producing human hair cells for the first time in a culture dish. This work could lead, in the long run, to novel therapies based on cell transplantation. Equally exciting is an ongoing approach to use embryonic stem cell-based approaches for the discovery of novel drugs that could be used for treatment for deafness.

## **JUNE MEETING VISITORS**

We welcomed a new member at the last meeting, Rene Parinet. We also enjoyed seeing Jeanne Glass again. Another visitor was Eric Mayer, the Hearing Aid Specialist from Sam's Club in Long Beach. Please come back! We look forward to seeing you at our meetings. Current members: Bring a guest to our next meeting.

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## **SUMMARY OF JUNE CHAPTER MEETING**

Fun was had by all during the potluck by playing "Party Bingo!" We learned new things about each other and things got a little competitive. After eating, members shared their favorite "hearing tips" which included go to a quieter room or outside at a party, use a hearing dog, use CaptionCall, start a conversation with "I'm hard of hearing, please talk a little more slowly and clearly" or "Please look at me and don't cover your mouth," meditation, sit up front, get their attention first, know what the topic is and, finally, turn the volume up!

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## **WALK4HEARING REPORT**

The Beach Bums raised \$2,795 — placing us among the top 5 teams. Maxine Barton-Bauman and Connor Waterman were among the top 20 walkers! Thank you all for your generous support.

# INVISIBLE COCHLEAR IMPLANTS

## Wirelessly rechargeable device wouldn't need a skull-mounted sensor.

MIT News Magazine  
Larry Hardesty, April 23, 2014

Cochlear implants that electrically stimulate the auditory nerve have granted at least limited hearing to hundreds of thousands of people worldwide who otherwise would be totally deaf. Current devices, however, require that a transmitter about an inch in diameter be affixed to the skull, with a wire snaking down to a combined microphone and power source that looks like an oversized hearing aid.

Researchers at MIT's Microsystems Technology Laboratories collaborated with physicians from Harvard Medical School and the Massachusetts Eye and Ear Infirmary to develop a new low-power signal-processing chip that could lead to a cochlear implant with no external hardware. It would be wirelessly recharged and would run for about eight hours per charge.

They also developed a prototype charger that plugs into an ordinary cell phone and can recharge the signal-processing chip in roughly two minutes.

"The idea with this design is that you could use a phone, with an adapter, to charge the cochlear implant, so you don't have to be plugged in," says Anantha Chandrakasan, a professor of electrical engineering and corresponding author on a paper by Marcus Yip, PhD '13, presented at the International Solid-State Circuits Conference. "Or you could imagine a smart pillow, so you charge overnight, and the next day, it just functions."

Existing cochlear implants use an external microphone to gather sound, but the new implant would use the natural microphone of the middle ear, which is almost always intact in cochlear-implant patients. Normally, delicate bones in the middle ear, known as ossicles, convey the vibrations of the eardrum to the cochlea, the small spiral chamber in the inner ear that converts acoustic signals to electrical ones. The new device would employ a tiny sensor that detects the ossicles' vibrations, relaying their signal to a microchip implanted in the ear. That microchip would convert it to an electrical signal and pass it on to an electrode in the cochlea.

Lowering the power requirements of the converter chip was the key to dispensing with the skull-mounted hardware. Among other innovations, Chandrakasan's lab developed a new signal-generating circuit whose waveform—the basic electrical signal it emits—requires 20 to 30 percent less power to produce than those used in existing cochlear implants.

The researchers showed that the chip and sensor can pick up and process speech played into the middle ear of a human cadaver. They also tested the new waveform on four patients with cochlear implants and found that it did not compromise their ability to hear.

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## MÉNIÈRE'S RESEARCH STUDY

Hearing Health Foundation (HHF) likes to keep you informed of clinical research studies that are available for patients to potentially participate in. Below is a study that may be of interest to those who are affected by Ménière's disease. If you suffer from Ménière's disease local doctors need your help.

Call now (800-994-4647) or visit

<http://menieresdiseasestudy.com/about-the-study.html>

People suffering from Ménière's disease experience a variety of symptoms that may come and go, ranging from extreme dizziness, vertigo (a feeling that your surroundings are moving when there is no actual movement), nausea, tinnitus (roaring, humming, or ringing sounds in your ears), pressure and pain, and hearing loss.

The purpose of this research study is to evaluate the effectiveness and safety of an investigational drug compared to placebo (inactive substance) in people with Ménière's disease.

To qualify for this study, you must:

- Be between 18 and 80 years of age
- Be diagnosed with unilateral (one ear only) Ménière's disease
- Have tried low-salt diet and/or diuretics (water pills) for at least one month to treat your symptoms
- Have experienced hearing loss in one ear over the last 12 months

All study related office visits, medical evaluations, and the investigational medication will be provided to qualified participants at no cost. If you decide to participate in this study your total participation will last up to 5 months (20 weeks). You will be required to visit the study site 6 times over 5-month study period.

Please Note: HHF is promoting this clinical trial for informational purposes only. HHF is neither a sponsor nor an organizer of the trial, which is wholly coordinated by Otonomy, Inc.

## HLAA turns 35!



From Ed Ogiba  
HLAA Director of Chapter Development

HLAA turns 35 in November. The question that I have for all of you is how should we celebrate? We need your ideas.

HLAA has changed a lot of lives and made a difference for so many, including you and me. We would like to recognize the 35 years of HLAA accomplishments with 35 simple events starting in November 2014 and ending in November 2015 with a grand gala reception. In the 12 months leading up to the gala, we want to celebrate with 35 easy-to-do "events in order to bring all of HLAA nation together each month, state-by-state and chapter-by-chapter.

For example, one HLAA member suggested each chapter have a Movie Night on the same evening where chapter members shared a captioned movie at a local theatre and all of us went out of their way to thank all the theatre staff while they were there.

Another member mentioned it might be nice to simply recognize those who have been the chapter's biggest supporters over the years at the chapter's holiday party. The honorees might include past officers, donors and sponsors.

Someone else mentioned the idea of chapter members inviting family, friends and other people with hearing loss to meetings with a chapter goal of having 35 newcomers visit the chapter in the birthday year.

I love all three of these ideas, especially since they all offer photo opportunities for each chapter to share. But we need a total of 35 ideas to suggest to all chapters with the idea that each chapter would plan do at least one a month. So what else might we consider?

The theme of the year's celebrations is **35 years for 48 million!** The idea is to commemorate our 35 years of education, advocacy and support we provide for the 48 million Americans with hearing loss.

Why not ask your members for their thoughts by spending a few minutes brainstorming at your next chapter meeting?

*So, Chapter Members ... What do you think? Have any great ideas for celebrating HLAA's 35th anniversary at the November meeting? Contact Bill Busch or Gail Morrison at the phone numbers listed in the Officers' section or send an email to [hlaabl.informer@gmail.com](mailto:hlaabl.informer@gmail.com).*

## InnoCaption To Hit Market in Late June

Reprinted from Library Services for the Deaf and Hard of Hearing

<https://tndeaflibrary.nashville.gov/announcements/innocaption-to-hit-market-in-late-june>

It's been over two years, but Miracom -- a Kansas firm that's developed an app to help the deaf and hard-of-hearing use mobile phones -- has finally gotten government approval to hit the market.

As The Washington Post reported in October, the Kansas firm had successfully designed an app, InnoCaption, to accurately transcribe mobile phone conversations in real-time. But it was spinning its wheels as it waited for the Federal Communications Commission to grant it access to a government fund that would allow deaf consumers to use the app for free.

The fund, known as the Interstate Telecommunications Relay Services Fund, reimburses companies for providing communication services to those with hearing or speech problems. But after evidence that some companies were deceptively padding their reimbursement requests, concerns about fraud in the multi-million-dollar fund held up Miracom's progress and threatened to put the app on the ropes. Now, Miracom is planning a full release at the end of June. "This is just tremendous," said Chuck Owen, Miracom's chief operating officer. "We are very excited to be approved, be a part of the TRS community, very excited to offer a functionally equivalent solution to those that are in need and can make great utilization of this product." Owen said the company will make its official announcement to launch its service at the *Hearing Loss Association of America* conference at the end of June.

The FCC said in a public notice Tuesday that Miracom has now been granted conditional approval, while the agency evaluates the effectiveness of the InnoCaption app's unique approach to captioning cellphone calls: using human stenographers to transcribe the conversations in real-time. Using people to transcribe calls, the company claims, provides more accurate transcriptions than software-based services. The conditional approval gives Miracom a chance to prove that its unusual method is fast, accurate and scalable.

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**The Long Beach/Lakewood Chapter  
of HLAA  
now has a Facebook page.**

<https://www.facebook.com/HLAALongBeach.Lakewood>

## BLOG OF THE MONTH

### SAY WHAT CLUB BLOG A HEARING LOSS AND LATE DEAFENED BLOG

If you are experiencing hearing loss, SayWhatClub (SWC) is the place to connect with others who have similar experiences and can relate to what you are going through. SayWhatClub is a nonprofit, tax-exempt organization run by volunteers, and membership is free.

Our on-line communities provide access to people who know the feelings, frustrations, and yes, even the humor you are likely to encounter. This is a great place to share and support each other without having to strain to hear a conversation. A friend who understands is only as far away as your computer.

Visit the official Say What Club Blog website. We invite you to read what others say, and to post your own stories or comments.

Some current articles include:

- [Drunken Sailor Syndrome - Living and Working with Vertigo](#)
- [I'm Tired Of Feeling Excluded](#)
- [Why Hearing Aids Cost So Much](#)
- [Why Insurance Companies Don't Pay for Hearing Aids by Dr. John S. Ford](#)
- [Lets talk about hearing loss cluelessness](#)
- [Life Can Be Hell With Menieres Disease](#)

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## LINKS

### Amazing Chicken Discovery

Hearing Health Foundation  
<http://www.earq.com/news/stem-cells-treatment-hearing-loss>

### Hair Cell Regeneration and Hearing Loss

National Institutes of Health  
<http://report.nih.gov/nihfactsheets/viewfactsheet.aspx?csid=94>

### Stem Cells Point Toward a Treatment for Hearing Loss

Indiana University School of Medicine  
<http://www.earq.com/news/stem-cells-treatment-hearing-loss>

### Hearing Loss Association of America

<http://www.hearingloss.org/>

### Hearing Loss Association of America, California State Association

<http://www.hearinglossca.org/>

### Hearing Loss Association of America, Long Beach/Lakewood Chapter

<http://www.hlalongbeachlakewood.org/>

## REMINDER – DONATE YOUR OLD HEARING AIDS

Old hearing aids are still being collected for the John Tracy Clinic. Bring them to the next meeting.

If you have a question or problem that relates to your hearing, please submit to: [info@hlalongbeachlakewood.org](mailto:info@hlalongbeachlakewood.org).

If you have old copies of the magazine "Hearing Loss" please bring them to the next meeting.

## HEARING LOSS ASSOCIATION OF AMERICA LONG BEACH / LAKEWOOD CHAPTER

### Officers

President - Bill Busch  
Vice - President - Gail Morrison  
Treasurer - Walt Lowrie  
Recording Secretary - Craig Bowlby  
Corresponding Secretary - Ken Saw

### Committees

Hearing Assistive Technology - Herb Balkind / Gordon Langsam  
Information - Vacant  
Lip Reading - Linda DeGuire  
Looping - Ram Kakkar  
Membership - Flo McDavid  
Newsletter - Katie Wright  
Programs/Publicity - Gail Morrison  
Refreshments - Sally Geiger  
Ways and Means - Stephen Fisher

### Support

Newsletter Layout - Lisa Rettino  
Professional Adviser - Dr. David DeKriek, Au.D.

### Chapter Contacts:

Bill Busch, 310-540-6322, [billbusch@ieee.org](mailto:billbusch@ieee.org).  
Gail Morrison, 562-438-0597, [gail7go@gmail.com](mailto:gail7go@gmail.com).

## HLAA

**Join HLAA now** to receive *Hearing Loss Magazine* and become part of the one organization that represents the interests of 48 million people with hearing loss in the United States. Send \$35 / \$45 for individual/family membership to:

Hearing Loss Association of America  
7910 Woodman Avenue, Suite 1200,  
Bethesda, MD 20814.

Phone: (301) 657-2248 Voice; (301) 657-2249 TTY

To join online, go to <http://hearingloss.org/>

Membership brochures are available at our chapter meetings.

**CTAP** California Telephone Access Program  
Information, Repair & Exchange

**English** Voice 1-800-806-1191 **Spanish** Voice 1-800-949-5650

# WAR IS LOUD: HEARING LOSS MOST COMMON VETERAN INJURY

by Kay Miller | News21 Published Aug. 24, 2013

<http://backhome.news21.com/article/hearing/>

*Note: article edited for space*

Marine Corps reservist Mauricio Mota served in five combat zones between 1987 and 2008, the last one in Iraq, where he slept next to what he described as “deafening” field generators and rode in loud helicopters. In training he fired an even louder weapon, a “bunker buster.” Toward the end of his Iraq tour, the now-retired staff sergeant said he realized his hearing had gone bad. “I found myself telling others, ‘Wear some ear protection so you don’t go deaf like me,’” he said.

Among post-9/11 veterans, 414,000 have come home with hearing loss and tinnitus, or ringing in the ears. The most-widespread injury for veterans has been hearing loss and other auditory complications, according to interviews and benefits data. Hearing maladies cost more than \$1.4 billion in veterans disability payments annually, according to fiscal year 2010 data from the Hearing Center of Excellence, a part of the Department of Defense. At least \$216 million was spent that same year for hearing aids and related devices, according to an advisory committee report to the VA.

Paying an average of \$348.15 each, the VA buys one in five hearing aids sold annually in the U.S., according to that 2010 spending report, the last year that data was available.

While much of the public concern about injuries suffered by post-9/11 troops has focused on missing limbs, traumatic brain injuries and post-traumatic stress disorder, Scott C. Forbes, immediate past-president of the Association of Veterans Administration Audiologists, said “Actually, I think the signature injury is an auditory injury.”

Hearing injuries are the most commonly documented trauma, said Forbes, a Marine veteran who has a doctorate in audiology and served during the Gulf War and Somalia conflicts. He has been a VA audiologist for 13 years. The most common disability among all veterans is hearing related, according to a January 2011 Government Accountability Office report.

Despite being such a prevalent condition, hearing problems don’t get much attention, because “in general, very few people die because of hearing loss,” said Theresa Schulz, a retired Air Force audiologist who now works in a similar capacity for Honeywell Safety Products.

In October 2008, Congress mandated a Pentagon-based office that would determine ways to prevent, diagnose, mitigate, treat, rehabilitate and research hearing loss and auditory issues for active-duty service members and veterans. Experts say too few returning veterans, like most people, don’t seek medical attention for their hearing loss when they first notice it. They just live with it.

“We know that it is usually seven years between the time someone notes a problem with their hearing and the time they actually seek medical attention for it,” said Nancy Macklin, director of events and marketing for the Hearing Loss Association of America.

Prolonged excessive noise damages hearing, according to the National Institute of Deafness and Other Communication Disorders (NIDCD), a division of the National Institutes of Health. Loud noises destroy the ear’s special cells, called “hair cells.” The ear cannot grow new hair cells. On flight decks, noise levels are around 130 decibels and helicopter noise is around 100 decibels, according to military noise assessment. A soldier near an M60 machine gun is exposed to 150 decibels and within 50 feet of an exploding grenade, 160 decibels.

Blast pressure also damages hearing. Eardrums can rupture at pressure as low as 5 pounds per square inch, a fraction of what it takes to damage internal organs. Explosives used in Iraq and Afghanistan create pressure that exceeds 60 psi, according to VA audiology research. The pressure that damages lungs and intestines is 56-76 psi.

Another feature of blast injury and hearing impairment is that it likely will show up later, often as part of blast-induced traumatic brain injury.

Retired Army Capt. Mark A. Brogan was severely wounded in Iraq when a suicide bomb attack blew away part of his skull. Beyond his surviving that 2006 blast, Brogan said he is amazed by how much his hearing-assistive devices improved his life. Brogan uses a device called CapTel lets him hear and read a transcription of telephone conversations as he listens to them. “I had to find ways to re-engage and I just happened to discover a local HLAA (Hearing Loss Association of America) chapter,” Brogan said by phone from his Knoxville, Tenn., home. After speaking at an association convention, he now is invited to speak on many speaking panels, for organizations such as the HLAA and the Veterans of Foreign Wars.

Army Col. Vickie Tuten, associate director for the Hearing Center of Excellence, and Kyle Dennis, the VA representative to the center, work together to assure veterans’ well-being.

The VA and the Defense Department had worked together for about a decade, but the formal establishment of the HCE and its “one voice,” Dennis said, “is a welcome development.” That focused effort also could lead to much-needed advances in technology. For example, service members in 2011 told the GAO that they do not always wear hearing protection because of concerns with “comfort and communication.”

“There is emerging technology for the future to protect the hearing of our service members,” Tuten said. “We will see a time in the future that we won’t have to accept hearing loss as part of military service.”

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## COCHLEAR USERS PAID RESEARCH STUDY

Dr. Fan-Gang Zeng's Laboratory at UC Irvine is recruiting Cochlear users (Nucleus 24) for a paid, research study (\$10 per hr + 0.55 per mileage). They are looking for CI users with more than 1 year of CI experience and with a CI in one ear and a HA in another ear (bilateral users are also welcomed). If interested, please contact Carol Pham, email: [carol.pham@uci.edu](mailto:carol.pham@uci.edu).



Long Beach/Lakewood Chapter

Hearing Loss Association of America - Long Beach/Lakewood Chapter  
c/o Katie Wright  
7802 Kingbee Street  
Downey, CA 90242

**First Class**

Address Service Requested

**SCOREBOARD**

	<b>MEMBERS</b>	<b>GUESTS</b>	<b>TOTAL</b>
June '14	29	1	30
May '14	42	1	43
April '14	32	6	38
March '14	34	7	41

**OPEN-CAPTIONED THEATER EVENTS**

**Ahmanson Theater**  
213-628-2772 or 213-680-4017 (TTY)  
<http://www.centertheatregroup.org/tickets/Project-DATE/>  
WE WILL ROCK YOU Sat., 8/23 @ 2pm

**Seegerstrom Center for the Arts**  
714-556-2787  
<http://www.scfta.org> then click on 'Ticket' then 'Accessibility'.  
GHOST Sun., 7/13 @ 1pm  
ONCE Sat., 8/30 @ 2pm

**Pantages Theater**  
323-468-1780  
<http://hollywoodpantages.com/accessibility>  
GHOST THE MUSICAL Sun., 7/13 @ 1pm  
ONCE THE MUSICAL Sun., 8/3 @ 1pm

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