

AUDINEWS

The Newsletter of the International Society of Audiology

WWW.ISA-AUDIOLOGY.ORG

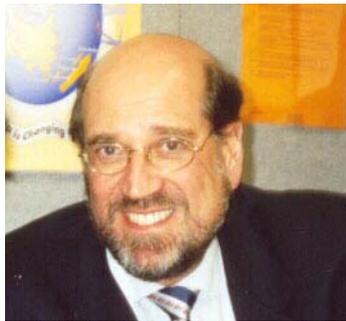
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I.S.A. PREPARING FOR HONG KONG

FROM THE DESK OF THE SECRETARY-GENERAL

Johannis Verschuure

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Dear Colleagues,

It has been about a year since I sent in my report on the activities of the Society, just around the time of the Congress in Innsbruck. I still remember that meeting with fond memories, and I want to thank the Austrian organizers who put so much effort in it.

After the meeting we picked up the usual work with presentations at the Hearing International meeting in Manila, Philippines, which was a combined conference with the Philippine ORL Society. We had a good meeting and George Mencher spent some time teaching at the St. Tomas University with Prof. Norberto Martinez. It is good to see the progress in Audiology that has been achieved in a country like the Philippines. Universal neonatal hearing screening has now been introduced in most areas of the country with follow-up services in place. I must say that this is quite an achievement.

Other projects for the Society are coming along fine. Membership is gradually rising. For various reasons each year we lose a number of members but throughout the year, thanks to the excellent work of the Assistant Secretary-General George Mencher and his team, we pick up more again. We also want to recruit more affiliated societies and although this number is also steadily growing, we would like to see this membership really functioning as a link between professional organisations worldwide. We will have to work even further on that during the coming year.

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The merger of Audiology into the International Journal of Audiology is developing quite well; it seems that the monthly publication is really helping us to move forward. A matter of concern is the pending court case over the journal with the former publisher: B.C. Decker.

The differences between us and Decker have not been settled and the case will be taken to Court later this year.

Our joint efforts with Hearing International are progressing steadily and the cooperation with W.H.O. and WWHearing is developing even further. There is still so much to do in most parts of the world where Audiology services are absent or poorly developed. The new estimate of W.H.O. on the global burden of the disease repeated the conclusions from the 2000 study, considering hearing impairment is a major cause of loss of quality of life, far more than other chronic illnesses that get far more attention and therefore, more money. Considering the importance of these findings, the fact that most hearing-impaired people in the developing world do not get the necessary services is a matter of great concern. In this respect I would like to thank our Humanitarian Audiology Group (chaired by Jackie Clark) for their continued interest and support. It is noteworthy that a questionnaire developed in this group has been adopted by WWHearing as an effective tool to generate an inventory of volunteer working resources.

The Executive Committee held a meeting in Heidelberg, in June, at the EFAS Congress. It was good to talk to each other and a fine opportunity to discuss current issues that pertain to our Society and the strategies to continue pushing ISA forward. One of the major points in the agenda was, of course, the coming congress to be held in Hong Kong. From the reports we reviewed it is possible to conclude that our Chinese colleagues are really putting up a great effort to make it a memorable Congress, with a large attendance from the Western Pacific area. We are convinced they will achieve their goals.

With the new ICA Congress also comes a next round of election procedures. The election this time is for members of the General Assembly representing North America, Asia and Western Pacific. If you are interested in representing your region, please, let us know immediately. The election for members of the Executive Committee involved the new President-Elect and the representative of the Members-at-Large. Again, if you want to propose someone for these jobs, let us know.



A special note should be mentioned about the election of a new Secretary-General. Officially, I could serve for another period of two years, but since I have held the position for so long, I feel the need to open the opportunity for a younger person to take over. The election is defined, in principle, for a period of six years with the possibility of one re-election. I have done the job for quite some time and I can assure you that being the Secretary General of ISA is a very rewarding job. Getting to know so many areas of Audiology and having to deal with so many issues related to the field makes it a very interesting job. The Executive Committee is already working in dealing with potential candidates for the post and will appreciate your comments, suggestions and even possible nominations (If you are interested, please, let me know, also if you know someone who we may approach and would be interested in the job).

The last issue I want to bring to your attention is the venue of our congress in 2014. The meeting should preferably be somewhere in the Western Pacific region. If you are interested in the organization of the 2014 International Congress of Audiology, please, contact me and I can certainly provide you and your national group with the guidelines for the bidding procedure. We would like to receive definite bids before March 2008, to be able to consider the options and make the best choice possible at the General Assembly Meeting during the Hong Kong Congress.

This message is an update and a request for a response from our membership. I hope it will brief you about what is going on in the Society. If you have any questions, don't hesitate to contact me. I look forward to seeing you all in Hong Kong next year.

The
INTERNATIONAL SOCIETY OF AUDIOLOGY
is looking for an
EDITOR
for
AUDINEWS

INCENTIVES: Four issues per year, working with an editorial team, developing new columns and areas of interest to members, a budget with funds for necessary traveling, etc.

Those ISA members interested, please, contact:

Juan J. Madriz (j13madriz@yahoo.com)

or

George T. Mencher (gtmisa@yahoo.com)

PRESIDENT'S MESSAGE

George A. Tavartkiladze, President of ISA

(gtavartkiladze@audiology.ru)

Follow-up algorithms in children with hearing loss: Current trends.



Significant hearing loss is one of the most common major abnormalities present at birth, which, if undetected, will interfere with speech, language, and cognitive development.

Significant bilateral hearing loss is present in 1 to 3 per 1000 newborn infants in the well-baby nursery population, and in 20–40 per 1000 infants in the intensive care unit population. As the amount of irreversible damage to the developing brain due to deprivation of the auditory pathways depends on the duration of the lack of auditory input, the identification and the intervention have to start as early as possible.

Currently the average age of detection of significant hearing loss is ~14 months.

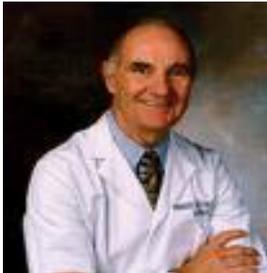
At the same time, the main goal (gold standard) is the universal identification of hearing loss in infants before 3 months of age and the appropriate intervention starting no later than by the 6th months of age (Joint Committee of infant Hearing, 1994; AAP Policy Statement, 2000).

Many programs for universal hearing screening have been developed and are widely used all over the world. Nevertheless, the follow-up algorithms for those babies who failed the screening still await resolution. An even worse situation happens with babies who passed the screening; some of them, the hereditary or acquired hearing impairment can be of late onset. This fact requires new strategies to approach this issue, based on the peculiarities of the different national hearing health care systems.

Recently, two electrophysiological testing systems have become the basis for sufficiently valid and reliable screening results: evoked otoacoustic emissions (EOAE) and auditory evoked brainstem responses (ABR). With the third generation of the automated devices either one of these measurements, or both combined, can be conducted. The most recent research supports the notion of a staged screening procedure. The concept involves two or three screening steps prior to the diagnostic assessment of a hearing disorder (first and second EOAE tests and ABR). The practicability studies show that with the use of the three-step approach the positive predictive value for a significant hearing disorder can be brought up to more than 50%. Newborns who exhibit a known risk factor for hearing impairment should primarily be tested by ABR methods.

Bearing in mind that in children who passed the universal screening can still suffer from a late onset hereditary hearing impairment or an acquired hearing loss (ototoxic drugs, trauma, virus and infection diseases), hearing testing should be performed at the level of an outpatient pediatric clinic, at the ages of 6 and 12 months, and every year after that. Moreover, hearing should be tested in children suffering from any form of speech developmental delay. This means that universal hearing screening should be considered as part of the combined long-term hearing screening program, including hearing testing in kindergarten and in elementary school children groups, questionnaires (1 year of life), etc. Awareness from parents, hearing health care specialists and the society in general is of the primary importance.

AUDINEWS welcomes again Robert W. Keith as Chair of the Committee on Student Membership and Participation. He is now in charge of this section, representing ISA's commitment to strengthen student involvement with the Society and its activities throughout the world.



**ISA COMMITTEE
ON STUDENT MEMBERSHIP
AND PARTICIPATION
(COMMITTEE PAGE)**

Robert W. Keith

**Student Committee of the International Society of
Audiology**

The Student Committee of the International Society of Audiology is currently seeking persons interested in volunteering for a special task related to student recruitment and retention. You will recall from a previous message that the purposes of the committee are to promote increased student involvement in the society, identify new opportunities and incentives for student members, increase student membership, and establish mechanisms for helping students in the transition from student members to full members upon graduation. We have many ideas under consideration but are committed to identifying individuals who are interested and willing to serve on the committee in the implementation of the charge. In general our plan is to form the committee by the end of September, meet through the internet to solicit ideas from committee members, and formulate a plan for implementation of the various goals of the committee. If possible, we would like to meet face-to-face with anyone who will go to the ISA conference in Hong Kong next year.

Whether you are a student or full member I would like to hear from you. We hope to have committee member involvement from many countries around the globe. Please contact me at robert.keith@uc.edu.

We look forward to hearing from you, and to seeing the fruits of this new committee.

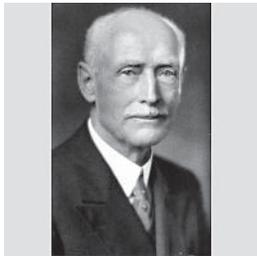
AUDIOLOGY IN HISTORY

This is a virtual tour of the history of Audiology lived through the lives and work of some of its most prominent protagonists and scientific leaders. This section will present a summarized look to old and contemporary giants of the fields of hearing and hearing impairment. We will remember those whose legacy opened new trails of development and knowledge, and allowed us to experience the magic of hearing and the wonders of technology aimed to serve and ease the hardships of those with hearing disabilities. Welcome to the “time machine” of Audiology.

CARL EMIL SEASHORE (1866-1949)

Presented by Sanford E. Gerber

(seg49@netzero.net)



Some years ago, I worked for Arnold Small Sr., the father of the distinguished audiologist at the University of Iowa. Dr. Small had been a colleague of Dr. Carl E. Seashore many years earlier, and we often spoke about him. Seashore should be regarded as the father (maybe the grandfather) of modern psychoacoustics. His book, “*The Psychology of Musical Talent*”, remains available today. It was first published in 1919 and

again in 1938 under the title of “*The Psychology of Music*”. The Seashore Test of Musical Talent remains in use.

Seashore’s birth name was Sjostrand when he was born in Sweden. In 1869, when he was only three years old, his family immigrated to the United States and settled in Iowa; they were farmers. At some point he translated his name into English as Seashore. He attended Gustavus Augustus College in Minnesota. He studied Classics, but also became engaged in singing and demonstrated a lifelong interest in music. It was his interest in music that led him to the study of what we now call psychoacoustics. He did his graduate studies at Yale University, receiving his doctorate in 1895. It is thought that his was the first Ph.D. awarded in Psychology at Yale.

Seashore returned to Iowa in 1897, where he was initially appointed an Assistant Professor of Philosophy. In 1908, he became Dean of Iowa’s graduate school. That same year, he established the university’s psychological clinic, which still bears his name. He was President of the American Psychology Association in 1911. He retired from Iowa at age 70 (in 1937) but returned in 1942 to serve another four years as Dean. When he retired again, he was 80 years old. He lived to the age of 83.

Going through material to prepare this article, I found evidence that in 1899, he published an article describing a device that he called an “*audiometer*”. I suspect that this was the first use of that word. Since his publications centered on the perception of music and the assessment of musical talent, I believe it would be safe to say he had no idea how significant that word would become to the world of hearing and hearing impairment!

One final comment: Arnold Small Sr. once told me that there were really no electro-acoustic instruments to generate signals for his, and Seashore’s research. How did they generate tones? With his violin, of course!

So much of Seashore’s work continues to be in use today. Indeed, he was one of our great ancestors.



A. Charles Holland Foundation

2008 SCHOLARSHIPS

Request for Applications

The A. Charles Holland Foundation invites applications for a Scholarship in the field of Audiology/Otology. The Scholarship is intended to support a training stage of 2-3 months at a specialized Department (different from current affiliation) for trainees in Audiology/Otology.

Applications should include the object and duration of the training, including the Department where it could be undertaken (together with its written agreement), a CV describing specific fields of interest and previous experience, a list of publications if any and a letter of recommendation from the current Head of Department. Applications (in English) should be submitted by December 31st, 2007 and will be evaluated by three members of the Foundation Scientific Committee. The winners will be notified by MARCH 31st, 2008 and the grant will be awarded by May 31st, 2008.

Eligibility requirements: 1) University degree from faculties related to audiological and/or otological fields (Medicine as well as Audiology), 2) age under 35 years.

Five Scholarships of 6.000 Euro each will be awarded.

For further information and application forms please call A. Charles Holland Foundation Secretariat: +39-02.57312361 or write to: A. Charles Holland Foundation Secretariat, Via Ripamonti, 133, 20141 Milan, Italy – Fax: +39-02-57312367

e-mail: musatti@crsfoundation.org or crs@crsfoundation.org

ICA CONGRESS 2008

HONG KONG - CHINA

HONG KONG WELCOMES YOU IN 2008!

The XXIXth International Congress of Audiology will be held in Hong Kong from June 8 - 12, 2008. The Congress venue will be the Hong Kong Convention and Exhibition Centre, right by Hong Kong's famous harbour. As well as up-to-the-minute reports on clinical and basic research in audiology, the Congress will provide a wonderful opportunity to sample Hong



Kong's famous hospitality. The local organizing committee is working on an exciting social program for all Congress participants and partners. It certainly will involve some fantastic culinary experiences. Hong Kong's Chinese food is justly renowned throughout the world and you will not be disappointed by the variety and

flavour of the delicacies offered. Besides food from nearly all the regions of China, Hong Kong also boasts of having an enormous number of international restaurants, too. If you long for an Argentinean steak or for some Sydney seafood be assured that you can find it by the Convention Centre. After dinner, there will be no need to go straight back to your rooms. Join a group of colleagues and stroll around Wan Chai, Lan Kwai Fong or any of Hong Kong's busy evening districts. The nightlife in Hong Kong will keep you entertained for as long as you have the energy to keep going. The night view of the Hong Kong harbour is something that visitors often remember the most. The Congress social program will ensure you enjoy and see the harbour in its most spectacular fashion.

The Congress homepage is www.ica2008.com and the call for papers is now available on the website, along with detailed information about the conference program and links to the many attractions in Hong Kong.

The Discover Hong Kong website is a perfect place to start planning your Hong Kong adventure: [http:// www.discoverhongkong.com/](http://www.discoverhongkong.com/)

The local organizing committee hopes to see you at the XXIXth Congress of the International Society of Audiology.

Go to WWW.ICA2008.com!



International Society
of Audiology

香港聽力學會
HONG KONG SOCIETY OF AUDIOLOGY



ICA 2008

XXIXth International Congress of Audiology
Hong Kong



CALL FOR PAPERS

International Congress of Audiology, Hong Kong

Date: 8 - 12 June 2008
Venue: Hong Kong Convention and Exhibition Centre
Address: 1 Expo Drive, Wanchai, Hong Kong

THEME

LATEST TECHNOLOGIES
NEW PRACTICES
FUTURE DIRECTIONS

ROUNDTABLE TOPICS

- ▶ IMPROVING OUTCOMES OF HEARING PROSTHESES
- ▶ EPIDEMIOLOGY & GENETICS OF HEARING LOSS
- ▶ HEARING LOSS & AGEING

IMPORTANT DATES

FIRST CALL FOR ABSTRACTS	1 MAY 2007
DEADLINE FOR SUBMISSION OF ABSTRACTS	31 JANUARY 2008
NOTIFICATION OF ACCEPTANCE OF ABSTRACTS	29 FEBRUARY 2008

The abstract (no more than 200 words) should be submitted electronically via www.ica2008.com

For more information, please visit www.ica2008.com



THE RESEARCH MINUTE...

MARK KRUMM (mkrumm@cc.usu.edu)



Addressing EHDI Services in Rural Areas

Many of the readers have an appreciation for the rural and the isolated corners of the world. In these places are flowing streams, trout, towering mountains, rock climbing, exotic wild animals and whispering pines. Also in these places, health care services are frequently lacking or not available. Therefore, it is worrisome that while early hearing detection and intervention (EHDI) programs services are becoming increasingly available in rural communities, little is known about these services.

A review of the literature suggests rural hospitals can be so limited by expertise that even initial newborn hearing screenings cannot be successfully accomplished. One problem is that hearing health care professionals are not commonly employed in rural settings. This lack of professional expertise probably delays the initiation and continuation of EHDI services and may account for reports in the literature that metropolitan EHDI programs become established before those in rural areas.

In addition, Danhauer has noted the high turnover rates of screening assistants is problematic in rural communities and must be addressed by ongoing training. Further, Finitzo found that only some assistants are qualified to screen infants even with considerable training. These problems present substantial barriers to EDHI services as poor hearing screening techniques can result in false positive rates ten times greater than average.

Researchers do believe community based EDHI services are a necessity. When infant hearing services are not offered locally, consumers may refuse travel to distant regional centers because of transportation, expense and cultural obstacles. Clearly the presence of hearing health care professionals is required in rural health care centers and can be achieved through innovative strategies. For example, Danhauer indicated that at least in one California town, private practice audiologists assisted in community EDHI efforts providing newborn hearing screening, diagnostic evaluations and hearing aid fittings. The result of this collaborative effort was that the local EDHI program achieved all screening, diagnostic and habilitative goals.

Another strategy was described by Primus concerning the EDHI program in Wyoming (USA). EDHI services were provided by local private practicing audiologists located throughout the Wyoming prairies and mountains. A single coordinator supervised all EDHI programs in the state which resulted in seamless service delivery. Parents referred to distant medical centers for further infant hearing services were reimbursed for travel by the state of Wyoming. Primus believes newborn hearing screening rates approach 100% in Wyoming because EDHI services were conducted at the local level, coordinated state-wide by a single person, and parents were supported for travel.

Audiology telemedicine services might also prove valuable as a means to provide direct services in rural areas. Using computer networks enabled with telemedicine technology and interactive video, audiologists could supervise technicians conducting newborn hearing screenings or actually provide direct services to infants in distant communities.

Clearly, a number of solutions could be employed to support EDHI programs in under served communities. Unfortunately, the literature rarely addresses rural EHDI service concerns and offers even fewer solutions. No doubt, innovation and research will be required to enable effective EDHI programs in rural and isolated communities.

**Vth
PANAMERICAN
CONGRESS OF AUDIOLOGY**

BOGOTA, COLOMBIA

**Nov. 29th – Dec. 1st
2007**

**CONTACT:
www.pasaudi.org**

If you have changed your address or if you have problems receiving your journals or other materials, please contact
George Mencher, Assistant Secretary General
at
gtmisa@yahoo.com

**11TH Asia – Oceania ORL, Head & Neck
Congress
and**

**8th Hearing International
Annual Conference**

November 21-25, 2007
Royal Cliff Hotel, Pattaya, Thailand
Contact: www.asia-oceania2007.org

CALENDAR OF AUDIOLOGY EVENTS

- **International Conference of Pediatric Audiology**
Montreal, Canada
September 10-12, 2007
Contact: saac.chu-sainte-justine.org
- **Canadian Academy of Audiology – 10th Annual Conference**
Niagara Falls, Ontario, Canada
October 17th - 20th, 2007
Contact: www.canadianaudiology.ca/professionals/conference/2007/agenda
- **Auditory Processing Disorders (APD): 30 Years of Progress**
Cincinnati, Ohio, USA
October 25th – 27th, 2007
Contact: www.apdcincinnati.com
- **ASHA Convention**
Boston, Massachusetts, USA
November 15th – 17th, 2007
Contact: www.asha.org
- **8th Hearing International Annual Conference**
Pattaya, Thailand
November 21st – 25th, 2007
Contact: www.asia-oceania2007.org
- **V Panamerican Congress of Audiology**
Bogota, Colombia
November 29th – December 1st, 2007
Contact: cbaron@cable.net.bo
- **American Academy of Audiology**
Charlotte, North Carolina, USA
April 2nd – 5th, 2007
Contact: www.audiologynow.org
- **NHS2008 Conference**
Cernobio, Coumo Lake, Italy
June 19-21, 2008
Contact: www.nhs2008.polimi.it

EDITOR'S CORNER

For the International Society of Audiology, 2008 is an "Election Year". According to our modified By-Laws, this time the General Assembly of ISA has to undergo a renewal of those members representing North America, Asia and Western Pacific. The "Elections Committee", which, by the way, I chair – as the "Members-at-large" representative to the Executive Committee – will start sending out communications to the members from those regions of the world to actively engaged them in the nomination and voting for their representatives. The General Assembly renewed their representatives for Africa, Europe and South America during the past Congress held in Innsbruck in 2006. Furthermore, according to what we have learned from the Editorial for this 2007-3 issue of AudineWS, our Secretary General does not desire to continue in his position. We will have to start seriously thinking about who is the ideal person to be in charge of ISA and to continue pushing the Society further into the XXIst Century. We want to encourage our membership to actively participate in this



process and to commit and get involved in the different areas where ISA needs your full engagement: General Assembly, Society Committees, Humanitarian Audiology, etc. We look forward to a challenging year in 2008 and hope to have our e-mail inboxes full of messages from all of you who are eager to make a difference and shape our International Society of Audiology.



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Contacts: International Society of Audiology (www.isa-audiology.org)



INTERNATIONAL SOCIETY
OF AUDIOLOGY

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