



Audinews

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Society News

General Secretary George Mencher informs us that IJA is now available on line. Go to www.isa-audiology.org and log in using your user name and password. When you come to the page that welcomes you by name, go to the icon in the center of the lower portion of that page and click on "IJA ONLINE". This will take you to the Informa site and allow you read all current and back issues of IJA.

Also, you will soon receive information about membership renewals. This will contain information about delivery of IJA in 2012. This applies whether or not your membership renewal is due. Go to our website (www.isa-audiology.org) and click on the rotating icon to renew your membership or to join ISA.



For U.S. citizens traveling to Russia, there have been some changes in visa regulations. For information, go to <http://evisa.kdmid.ru>.

Humanitarian News

The 2nd Coalition for Hearing Health Conference succeeded in reaching consensus about global hearing health care concerns. Some of the actionable strategies that were discussed were advocacy and media, education in underserved regions, empowering families and communities, use of technology, and ensuring best practices.

The Global Coalition's Viet Nam Deaf Education Program seeks a pediatric audiologist to join their team from February 27 through March 16, 2012.

This person would be training teachers about audiology, fitting hearing aids on children, working with physicians and technicians about audiology protocols, and use of equipment. All travel expenses would be paid, but there is no stipend to participate. For information, contact Paige Stringer at paige@childrenwithhearingloss.org by December 9th.

Clinical News

German colleagues have discovered a new treatment for Usher Syndrome. They found that injecting a small molecule (PTC124) into a mutated USH1C gene causes a stop signal to be ignored.

Some end-of-life nurses claim that the dying can hear until the last moment of life. One said "...it appears from experience that hearing is the last sense to go." Oh?

We know that Cytomegalovirus (CMV) is an important cause of prenatally acquired progressive hearing loss. In the United States, annually, some 20,000 to 30,000 children are born infected with CMV and as many as 15% of them are hearing impaired. A recent study from the University of Alabama shows that the traditional heel-stick blood test is not effective, but that a saliva test can detect the virus. This is good news, indeed.

The good old Politzer Bulb is back, but in a new form. A new device, called the "EarPopper", which looks like a nasal spray, delivers a five-second regulated puff of air up the nose. One report claims that "after seven weeks of treatment, 75 per cent of the children's hearing had returned to normal."

In a recent article, Robert Ruben reminds us that "The approach of personalized medicine requires evaluation of four parameters: the individual patient's intrinsic susceptibility, intrinsic morbidity, extrinsic susceptibility, and extrinsic morbidity." In other words, let's remember to consider the patient in front of us.

Several recent papers have shown that Speech-In-Noise tests delivered via the internet are unsuitable. The on-line tests seem to be reliable, but there is extensive overlap between normal-hearing listeners and those with hearing loss.

Research News

An article in a recent issue of The Archives of Otolaryngology – Head and Neck Surgery has again shown that secondhand smoke is associated with otitis media and with sensory-neural hearing loss in teens.

Finnish colleagues have reported that classical orchestra musicians' hearing loss distribution corresponds to that of the general population. However, "highly exposed" musicians had greater hearing loss above 3 kHz than those with less exposure.

It is not news that infants exposed early to more than one language develop speech (and language) discrimination better than monolingual infants. What is news is that this has now been demonstrated with the use of evoked potentials. At six months of age, monolingual infants could discriminate among

speech sounds whether they were uttered in their home language or in another. However, by ten to twelve months they could no longer detect sounds in the second language. On the other hand, bilingual infants did not detect differences among speech sounds in either language but they did at 10 to 12 months.

In a similar study, it was found that exposure to parental language in the Neonatal Intensive Care Unit was a strong predictor of vocalizations at 32 and 36 weeks gestational age.

Affiliates' News

Last month marked the 19th Brazilian and International Congress of Speech Language Pathology with the theme "Communication as a right for all." There were more than 1,500 papers presented with 10 of them winning an Excellence Award and 20 more getting Honorable Mention.

Meetings

March 28-31, 2012 American Academy of Audiology, Boston. Contact: www.AudiologyNOW.org.

April 27 – May 3, 2012. Bureau International D'Audiologie (BIAP), Berlin, Germany. Contact: leboechat@terra.com.br.

April 29 –May 3, 2012. The XXXI World Congress of Audiology, Moscow, Russia, Contact: wwwWCA2012.ru.

May 7-10, 2012. New Zealand Audiological Society, Hamilton. Contact: www.audiology.org.nz.

May 9-12, 2012. CASLPA Conference, St. John's, Newfoundland. Contact: CASLPA Website

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