

Southern Hearing Charitable Trust

WINTER ISSUE, AUGUST 2010



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Welcome to the winter newsletter of the Southern Hearing Charitable Trust (SHCT). This newsletter is packed with great information from both the Paediatric and the Adult programs so read and enjoy.

Since our last newsletter Lisa Scott the original Trust Administrator has resigned to further her office management career and accepted a role with one of the local audiology clinics. Lisa was heavily involved in the setting up of the SCIPA, and the stand alone clinic, and the Trust acknowledges and thanks Lisa for the great job she has done for us and wish her well in her new role. To replace Lisa we have promoted Anne Courtney from her Reception role to the Trust Administrator role – many of you will already know Anne.

The year to June was without any doubt our busiest and most successful year ever. In total we implanted in the 12 months 43 adults and 20 children. We now have a total of 250 adults and 150 children in our programs. It certainly is a long way to have come from 2004 when just 4 implants were completed in the year. We continue to work closely with the Ministry of Health and the support we received from them in the later part of the financial year enabled us to implant 15 adults in June. We are currently in negotiations with the Ministry to renew the contract for the period from July 2011 and expect to have this signed off by Christmas. The AGM of the SHCT will be held a month later this year on the 28th October and details of this are included in this newsletter. We welcome anyone interested in the Trust and the CI programs to come along to this.

David Kent
Chair SHCT

THE
SOUTHERN
HEARING
CHARITABLE
TRUST



Notice of Annual General Meeting

To be held in Ronald McDonald House, Board Room
33 Cashel Street (cnr Cashel & Montreal Streets)
CHRISTCHURCH 8140

On: **Thursday 28 October 2010 at 7.30 pm**

Proposed Agenda

- Apologies
- Minutes of 2009 AGM
- Matters Arising
- Chairman's Report
- Finance Report
- Election of Trustees
- General Business

Tea, coffee and biscuits will be served afterwards

RSVP to:
Anne Courtney
c/- Southern Hearing Charitable Trust
Ph. 355 3041
Email: shctrust@xtra.co.nz

If you have anything of interest you would like added in the next edition of the Newsletter, please email Anne Courtney at: shctrust@xtra.co.nz

Paediatric Programme Update – Winter 2010

**By Neil Heslop, MNZAS-CCC
Audiologist/Manager (Paediatric)**

Welcome to the Paediatric Programme Update, the first for 2010.

We continue to be very busy. We now provide upwards of 20 children a cochlear implant each year. When we first started in 2003 we provided only 6 implants per year. With changes in technology we are providing implants for children with more residual hearing, with better results. The programme currently has over 140 children with implants that it supports throughout the Southern region.

The paediatric programme has now begun offering the MED-EL cochlear implant system. The adult programme has been offering this system since approximately 2006. Children and families who present for candidacy assessment will now be offered a choice between systems. In some cases there may be clinical reasons why we might recommend one system over the other but generally the choice will remain that of the family.

The review of Habilitation services being conducted by the Ministry of Education is now entering its final phase. The review was originally initiated by the Ministry in March of 2008. We are hopeful that the review will result in additional Habilitation funding.

Still on the topic of Ministry reviews, the Ministry of Education is currently reviewing Deaf Education and the Southern Hearing Charitable Trust (our governing body) has made a submission. We are unsure how this review will affect cochlear implant services. We will keep you informed of any outcome.

In this Newsletter Jill Mustard provides a brief report of her time working in the UK. Jill was based in the South of England Cochlear Implant Centre. As well there is a review of the 7th APSCI conference held in December 2009 in Singapore.

Loud Shirt Day is fast approaching again and the date this year will be Friday 17 September. Those who registered for L.S.D. last year should have received an e-mail from the organizing committee inviting them to re-register. If you haven't, please visit [HYPERLINK "http://www.loudshirtday.co.nz"](http://www.loudshirtday.co.nz) <http://www.loudshirtday.co.nz> for details of this year's event. More details of the event are included elsewhere in the Newsletter.

Children's Accommodation Arrangements



Important Information for Families

Van Asch Deaf Education Centre provides accommodation for children and families attending SCIP appointments.

Where possible we book appointments to allow people to attend the centre without the need for an overnight stay. In many cases, however, because of travel arrangements and clinical needs, children will require accommodation for at least one night and sometimes longer.

At the time we make appointments for your child we will indicate whether accommodation has been booked for you and on what dates.

- 1 Once you have received details of appointments for your child it is extremely important that you confirm your accommodation requirements with us prior to travelling.
- 2 If we have booked accommodation for you but you do not require it, please tell us.
- 3 If previously we have not booked you accommodation and circumstances change dictating that you need to stay overnight (e.g. air travel schedules), then it is EXTREMELY important that you tell us that you need accommodation. If we do not know that you require accommodation well in advance of your arrival then we may not have anything available at the time of your visit
- 4 If you have additional adults or children accompany you to an appointment, please tell us well in advance. We usually make accommodation bookings for one adult plus one child as this is what the Ministry of Health will fund. If we are not made aware of any additional people travelling and staying then there may be insufficient bedding and/or food in the accommodation we reserve.
- 5 For all appointments where accommodation is booked please complete and return the Cochlear Implant Visit form well in advance of your planned visit. This provides us details of the number of people attending, your food needs, plus any other requirements you have.

A Parent's Guide to Understanding Cochlear Implant MAP-ping

This has been adapted from an article by Nicole C. Sislian, MPhil, MA, CCC-A, Audiologist at the New York Eye & Ear Cochlear Implant Center in New York City.

Reprogramming of a cochlear implant or what is commonly called “MAPping” refers to the setting of the electrical limits necessary for the cochlear implant user to perceive both “soft” and “comfortably loud” sounds.

During the MAPping process, the perception of soft sounds through Threshold levels (T) and the perception of loud sounds through Comfort levels (C) are adjusted in order for the user to hear a wide range of sounds in ‘everyday life’. These measurements are downloaded into the speech processor, and then incorporated into a “coding strategy”, which the processor uses to send the electric signals to the internal implant in an organized manner. The processor will not allow the signals entering it to exceed these set parameters.

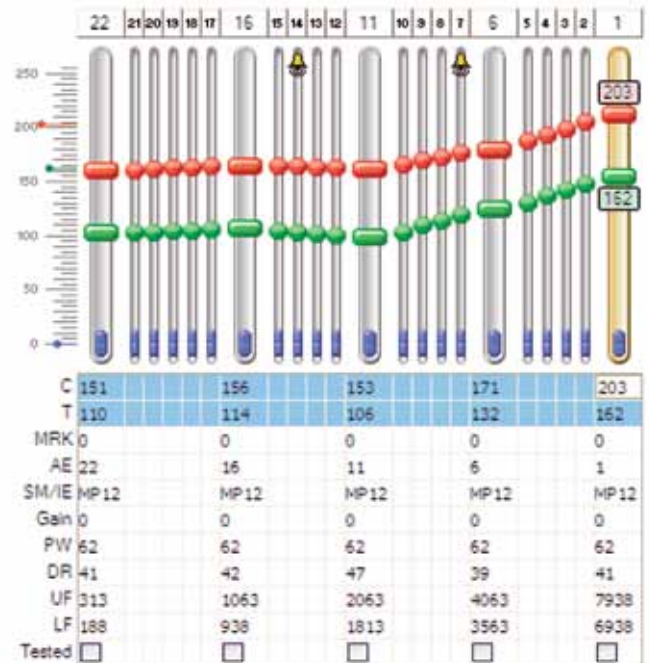
Updating the MAP

A cochlear implant user needs to have their MAP regularly updated, particularly in the first year following implantation. Over time, MAPs may become weak, softer, or less clear. This is the result of several factors including adaptation and tissue growth.

Fibrous tissue grows over the internally implanted device (electrodes and receiver) during the initial months following surgery. This process is normal. These changes may alter the amount of electrical stimulation needed to perceive the signal. The greater the tissue growth over the implant device, the more power is required to stimulate it.

Also, when the MAPs are new, they tend to sound louder. With experience, the user becomes accustomed to the stimulation and ‘adapts’ to it, finding that over time, it may no longer be a loud enough signal; reprogramming the speech processor compensates for any changes that occur due to adaptation.

Tissue growth and adaptation have the greatest effect in the first few months following implantation and MAP changes tend to be greater during this period. However, cochlear



implant recipients require regular reviews of their MAPS (usually annually) over the rest of their lives.

How a MAP is Produced

Generally speaking MAPping is the process of recording Threshold level (T) measurements and Comfort level (C) measurements based on a recipient's responses. They are unique to the individual. They may be obtained in several ways.

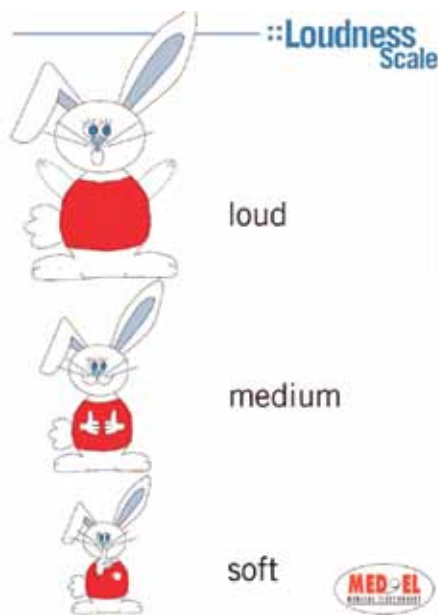
Threshold (T) Levels

Outwardly the recording of T-levels looks very much like other tests of hearing. For children over about age six, a hand raising method or something similar may be used to determine T-levels. For children under three years of age, Visual Reinforcement Audiometry (VRA) with puppets is used. The child is conditioned to turn to a toy in response to sound.

In both methods stimulation is reduced until the lowest level the child is able to detect is reached. This then becomes the T-level. T-levels are recorded separately on a number of (or all) electrodes.

Play audiometry is used for children three years to six years old. The child holds a block or other toy in their hand, and is taught to place it into a box when they hear the sound. The stimulation is again reduced until the lowest level that the child is able to detect sound is reached.

A Parent's Guide to Understanding Cochlear Implant MAP-ping



Comfort (C) Levels

C-level measurements may also be obtained in several ways, depending on the age of the child. For children with a language age over about 5 years, a loudness scaling chart or verbal response is used. Children report the point at which stimulation begins to be too loud. This then becomes the C-level.

C-levels are recorded separately on a number of (or all) electrodes. For children under the age of five, C-levels may have to be estimated, based on the earlier recorded T-levels, to set a "typical" MAP.

Additional Tests

Once a MAP is recorded it should be evaluated to determine its suitability, particularly in young children where behavioural responses may be inconsistent, or where they have little experience of sound. Evaluation of the MAP may include an audiogram and speech perception. Results of these tests may assist in the future MAPping process. These tests may be done less frequently than a MAP. Younger children and those recently implanted may have these tests performed more often.

MAP Reports

The MAPping report provides printed information on MAP parameters such as Threshold and Comfort level settings. It is not essential for parents to understand the information contained in this report. It is merely a print-out of the

settings created during the MAPping session. It should be used only as a reference for the MAPping audiologist.

What may be helpful are details of the number and nature of the programmes downloaded to the speech processor. After a new MAP is created the Audiologist has the option of adding additional features for listening in different environments.

Summary

When MAPping is performed effectively, the resulting MAP should provide the recipient both "soft" and "comfortably loud" sounds across a wide frequency range giving access to speech at normal conversational levels.

Parents may use the MAPping sessions to discuss their child's progress at home, school, and in therapy. Questions and problem issues may also be addressed. The audiologist will give recommendations on if and when to change programs as well as when a follow-up appointment should be made.

Some features of the MAPping process:

- There is no predictable relationship between a MAP and the benefit provided by an implant. It is not possible to predict reliably from a MAP how a child will do on an audiogram or speech perception
- There is no "correct" MAP. There may be a "typical" MAP but there is always variation from one child to another
- It is unlikely that technological developments in the near future will eliminate the need for frequent MAPping appointments in the first few months following implantation. The fibrosis and adaptation referred to earlier requires regular MAP reviews
- The cochlear implant manufacturers provide software and other tools that allow for the "automated" programming of cochlear implant MAPs. These methods have some use but are limited to the earliest MAPping appointments, being less relevant at future appointments. Behavioural MAPping is still the best indicator of an accurate MAP.



In December of last year I had the opportunity to attend the 7th Asia-Pacific Symposium on Cochlear Implants and Related Sciences (APSCI) conference held in Singapore.

The APSCI conference occurs once every 2 years and is perhaps the most important meeting in the Asia-Pacific region. It brings together representatives from the major clinics in Australasia (e.g. Sydney Cochlear Implant Centre, Melbourne Cochlear Implant Clinic) while also attracting many clinicians and researchers from leading European and North American centres. The conference delegates numbered somewhere in the region of 800-900 people including surgeons, audiologists, habilitationists/rehabilitationists, engineers, physiologists, biologists, and geneticists, among others.

The conference was a mix of product symposiums, research seminars, panel discussions, and poster presentations. This year the SCIP had 2 poster presentations on display, one on surgical outcomes following cochlear implantation, the other on auditory neuropathy.

The product symposiums were an opportunity to learn about the latest cochlear implant systems from the major cochlear implant manufacturers. Of the 3 major manufacturers world-wide, New Zealand supports the MED-EL and Cochlear Limited systems and so we observe developments by these companies with keen interest.

The research-based topics centred on a number of key topics: Audiological Issues, Basic Science, Cochlear Implant Technology, Medical/Surgical Issues, Rehabilitation and Education Issues, and Other Devices.

Some of the key questions posed at present include:

- How can residual hearing be preserved during cochlear implant surgery to allow recipients to use a combination of acoustic and electric hearing?
- Can people with more residual hearing be implanted earlier for greater benefit?
- What is the optimum age for implanting young children?
- How can we improve speech perception in noisy or other difficult situations through changes in processor technology?
- How can we improve implant and speech processor technology to cope better with tonal languages, music, and non-speech stimuli?
- What are the benefits of bilateral cochlear implants and who are suitable candidates?

As is always the case, material from this conference will inform our own practice to ensure that the services we offer here are in line with contemporary international practice.

I would like to thank Cochlear Limited for their generous support in assisting with some of my conference expenses.

By Neil Heslop, MNZAS-CCC, Audiologist / Manager (Paediatric).

Cruze Kapa - Gallipoli Experience

Cruze Kapa, is a 16 year old implantee, who has had a Cochlear Implant since the age of six years. He is currently studying at the van Asch Deaf Education Centre, satellite unit at Hagley College.

Gallipoli 2010

A poem by Cruze Kapa

I wandered through the trenches of Gallipoli.
To our ANZACS it was a haven, a retreat.
I saw thick grass, tomb stones of Turkish fighters.
I laid a flower on an unnamed French soldier's grave.
I saw memorials and tombstones of all different shapes
and sizes for our ANZACS.
From areas I could see the continent of Asia.
I smelt the Aegean Sea, I sailed the Dardanelles,
the narrows.
I felt the sorrow, the devastation (95 years ago).
I didn't endure the hostile fields of flying shrapnel,
booming of heavy artillery, blazing heat, the smell of
death, or see corpses laying on top of the earth
till a truce for burials was announced.
The steep terrain our soldiers were swallowed in,
I saw it, I felt it.
The sacrifices those soldiers and their families made
unselfishly...
I will never fully understand, but I felt it...
I travelled not on a troop ship taking six months,
but a RNZAF Boeing taking 3 days, to step ashore onto
Gallipoli... you remarkable soldiers.
Today I saw the beauty of Gallipoli, poppies growing on
the battle fields and hillsides, the peace and tranquility,
I felt peace walking the roads and battlefields of the past,
I felt the spirits of soldiers whose memories live on.
I walked the shores where our ANZACS landed,
I felt the Gallipoli earth, I smelt the sea today...
I saw the change in the soil, the changes in the
atmosphere.
I saw the respect our soldiers deserved.
The honour and glory that belongs to them.
I saw the tears in our war veterans' eyes, I felt their pain.
On ANZAC day I laid poppies for my whanau who still
serve today and for their brave heroes who gave their
lives at Gallipoli.
I took Papa Remana's photo to Gallipoli because I know
he'd be there looking in at what once was a cruel, cruel
land... he'd be happy there's peace there now.
You see... I'm deaf, but I can feel, and I can see.
I am blessed to have encountered such an experience
that will remain forever with me.



Cruze Kapa's trip to Gallipoli for ANZAC Day commemorations.

Hi to you all,

Last term Cruze Kapa was selected to travel to Gallipoli with the official NZ party. This was such an awesome experience for Cruze. We had texts back from him and I just wanted to share with you a little of what he has been up to.

Cruze had an amazing stay at Trentham military camp in Wellington before he left. He described it as "Amazing... honestly, it is amazing!". Cruze then travelled with the military, vets and other students to Darwin, then to Penang. The aircraft was meant to land in the United Arab Emirates but was not allowed into their airspace. They then flew to Istanbul and traveled by coach to Canakkale. Here they traveled to ANZAC cove and other commemorative sites. At The Nek and Chunuk Bair, the students got to walk through the trenches. Students have also visited Assos (historical Roman ruins/amphitheatre).

Cruze went to many official engagements and also had dinner with John Key.

On April 24th he attended the Turkish International Service at Mehmetcik on the Gallipoli Peninsula, followed by the French Memorial Service at Morto Bay, Gallipoli and then the Commonwealth Memorial Service at Cape Helles, Gallipoli. Phew, long day! Quick sleep before being woken at 12.30 AM to travel to the ANZAC commemorative site, Gallipoli Peninsula (5.30 am), then official breakfast, then on to the Australian Memorial Service at Lone Pine, Gallipoli. After this on to the 57th Regiment memorial, Gallipoli for their memorial service. Finally on to the last service of the day... the NZ Memorial service at Chunuk Bair.

And... he was so tired but the services were 'amazing' and 'beautiful'. Then he went on a ferry on the Dardanelles en route to Istanbul. Wow!

On their return journey, they travelled through Dubai, Penang and Darwin. Overnight in Wellington then home to Gisborne for some ceremonies at his Marae and visiting Kaumatuas around the East Coast... home for a rest!

*Bryanna O'Regan
Cruze's teacher*

Cruze Kapa - Gallipoli Experience

Cruze's Gallipoli Experience

I had an awesome time in Gallipoli and learnt so much. My favourite part was meeting people who went to Gallipoli on our trip and travelling to different countries. It was so amazing. I had never been to places like that before in my life.

I met Prime Minister, John Key and he is such a nice man.

I loved ANZAC day. Anzac Cove was a beautiful and amazing place.

I was really, really sad when I stood on the beach. I was just dreaming and imagining what it was like for all the people who died in 1915 and I felt emotional and very sad. We went to many different ceremonies for different countries and laid flowers on the graves of the soldiers.

I loved traveling to Istanbul and seeing Dubai. I learnt a lot about how mature teenagers behave, I was so amazed.

I loved meeting the veterans, they were so interesting.

Cruze Kapa.

Friday, September 17 is Loud Shirt Day!



The Southern Cochlear Implant Programme has once again joined with The Hearing House to hold "Loud Shirt Day" and raise money to help children with cochlear implants listen and speak.

On Loud Shirt Day, everyone goes to work in their loudest, brightest shirts and makes a donation to support deaf children with a cochlear implant. All donations from individuals and businesses in the Southern region will go directly to the Southern Cochlear Implant Programme, while all donations from the Northern region will go to The Hearing House.

In 2009, Loud Shirt Day raised more than \$20,000 for children in the Southern region. This money was spent entirely on the children's habilitation programme and was used to buy therapy materials, test equipment, toys, and books. Any money raised this year will again go directly in to the children's habilitation programme.

To make Loud Shirt Day a great success and raise heaps of money for children, we need your help to recruit as many schools and companies as possible to take part. To help, you can:

- Tell everyone you know about Loud Shirt Day
- Give the enclosed flyer to businesses and schools in your area
- Ring your local paper to let them know that September 17 is Loud Shirt Day

If you would like to take part in Loud Shirt Day to raise money for the Southern Cochlear Implant Programme, you can:

- Hold a Loud Shirt Day morning tea, lunch or dinner
- Register your office to take part in Loud Shirt Day

Visit www.loudshirtday.co.nz to register, or phone 09 969 3013, or e-mail us at loudshirtday@hearinghouse.co.nz.

We are very excited about joining with The Hearing House to hold Loud Shirt Day and raise money for deaf children with cochlear implants. We would be very appreciative of any support you can offer.

Cochlear Implant Centre, University of Southampton - Jill Mustard

Throughout 2008 and 2009 I worked at the South of England Cochlear Implant Centre at the University of Southampton, in England. The implant centre provides services for approximately 550 children and adults and employed 3 surgeons, 7 full-time equivalent audiologists, and 9 full-time equivalent habilitationists (speech-language therapists and teachers of the deaf) and administrative staff. The services offered are similar to the way we operate in New Zealand. Patients attended the clinic for audiology services and some habilitation, and habilitation staff also worked with children, families and local staff in homes, preschools and schools.

With a larger population the centre was able to offer all 3 main brands of implants – Cochlear, Medel and Advanced Bionics. Criteria for who is suitable for an implant are similar to criteria we use here. In 2009 the UK government agreed to fund bilateral implants for children so most young children now receive two implants at the time of initial surgery and some children implanted prior to 2009 are having a second sequential cochlear implant. Children who get sufficient benefit from a hearing aid, continue to use their hearing aid on the other ear.

There was a big focus on research, continuing professional development for staff and providing training courses for others. I was able to attend the 9th European Symposium on Paediatric Cochlear Implantation in Warsaw where a colleague and I gave a poster presentation about our research on Recognising Additional Disabilities in Children Implanted Under 2 years of Age. I also attended courses on Deaf children with Autistic Spectrum Disorders; Auditory Neuropathy, Cytomegalovirus; Listening to Learn Conference and research presentations within the University of Southampton. It was great to be able to take advantage of all these learning opportunities.



Lovely English snow

My husband and I also made the most of our time in the northern hemisphere by travelling a lot within the UK, Europe, Morocco, Jordan and, one of the highlights for me, travelling down the river Nile in Egypt



South of England Cochlear Implant Centre



On the banks of the Nile

Moving On

Jeremy Rosser, Clinical Specialist

Many patients will be familiar with Jeremy Rosser who is Cochlear's Clinical Specialist in New Zealand. Jeremy has worked at Cochlear Limited for 14 years and as such is one of their most experienced (and respected) clinical staff.

Jeremy has provided technical support and training to Audiology and other staff at SCIP. He has on many occasions worked alongside clinical staff in the administration of Integrity Tests, implant tests in theatre, as well as advice with MAPping procedures in challenging situations.

Jeremy recently announced his resignation from Cochlear Limited with the intention of pursuing work in Clinical Audiology again. His last day at Cochlear was 16 July. Cochlear Limited have yet to appoint a successor. In the interim we will continue to be supported by Cochlear from their Sydney base.

We would like to take the opportunity to wish Jeremy well in his future endeavors.

Adult Programme Update

The adult programme has been kept very busy this year with the sudden availability of funding for 15 implants and the requirement to spend the funding before the end of June.

A group meeting of the prospective implantees and their support people was organized and all surgeries completed before end of June. Of course now we are busy switching on all these people.



It is our pleasure to introduce to you our new receptionist/administrator, Rosie Giblin (left). Rosie has replaced Anne Courtney who has taken over from Lisa Scott as the new Programme Administrator.

Rosie joined Southern Cochlear Implant Programme for Adults in May 2010. She has come from a busy hearing clinic and she wears hearing aids herself.

She feels very privileged to be part of a special and positive environment and already feels part of the big family. She has 3 adult daughters and a miniature schnauzer. Her outside interests include theatre, travel, bridge, entertaining, and gardening.



This special lady (pictured left) has made a substantial donation to the Southern Cochlear Implant Programme which will enable a new recipient to receive an implant. Shirley MacMillan has recently been switched on and doing very well. She hopes the new recipient will do just as well.

WANTED

Nucleus Cochlear Implant systems Getting Started- For Adults DVD

This would have been given to you at the time of your Cochlear implant assessment . I only had a limited supply which has dwindled. Would dearly love them back so they can be passed on to others as they are a valuable resource. Please feel free to make a copy should you wish to keep one then return to :

**Penny Monteath
SCIPA
Milford Chambers
249 Papanui Road
Christchurch 8014**

Thanks to all that have returned them!

Sally Mason - News to Share

May 21st 2010

Hi everyone, some news I would like to share...

Many of you will know how much my hearing has deteriorated over the last 35 years. I have been losing more and more over the last few years, and despite all the skills developed in lip reading, guessing, pretending and just plain bluffing, it has become increasingly difficult to feel as if I am a real part of what is going on. I laugh when everyone else laughs (wishing I could share the actual joke); I smile non stop till my face sometimes feels like cracking, to dispel any indication that I am not hearing a word and have NO idea what is going on; I dread going out to wonderful meals at a restaurant, or a big noisy, happy gathering because that is when the panic sets in, and my smile becomes even more fixed... more and more I just avoid putting myself in such situations. And, I am sure that for those who don't realise the reasons, I appear snooty, bored and disinterested. I despair of the constant tiredness that blankets me - related I know to the often extreme amounts of concentration needed just to hear what is going on, especially in noisy situations. While enjoying company as I do, I often get "peopled out"!.....

I am sad to be able to use the phone less and less. I miss the contact with my kids overseas - Juliet in Melbourne and Nic in London, I miss the long chats I used to have with my friends while snuggled up on the couch, talking for hours... I feel more and more isolated... It is upsetting not to be able to hear the words of my lovely students in the workshops... and they go out of their way to make it as easy for me as possible.

Don has become my telephonist, my "P.A", my interpreter, my front man... what would I do without him?? All this has not stopped me doing the things I want to do - the travel at home and overseas, the workshops, etc.... it is just getting harder and harder.

BUT that is about to change!!!!!!!

Last August, at the urging of some very special friends, I went to Christchurch for exhaustive audiology tests, to see just how deaf I was. The results kicked me in the stomach - there was no leeway for my usual BLUFFING OR PRETENDING.... just the reality. And that was bad! As a consequence, I "made it" onto the Cochlear Implant waiting list, and was told there would be a 2-3 year waiting list. So, I carefully tucked the news away into the "things to be worried about later" box and got on with things as best I could.

Last week I was at beautiful Lochmara Lodge in the Marlborough Sounds, teaching a very special workshop. Lochmara has boat only access, so is a perfect place to be able to turn off the world.... and I had. But, the world had been trying to get hold of me.... I picked up a text to ask me to check my emails, and discovered that because the Govt. had released more funding, my cochlear surgery was going to happen VERY SOON!

A moment of panic struck me, reality hit, and I thank my students and the lovely staff at Lochmara for the amazing

Sally Mason - News to Share - continued

and immediate support. I had received the opportunity with only one day left to reply - and accept.... which I did. So, the roller coaster ride began, and several emails and phonecalls later, I now have news that my surgery will take place on June 3rd in Christchurch.

There then follows a period of healing - the internal part is embedded in the bone behind my left ear and an electrode connects to the auditory nerve... a bionic ear!! As a result of this op. the bit of hearing I DO have in my left ear will be destroyed - so I will be deafer than usual for a few weeks... which means of course that the already overpowering Tinnitus noises will have a free rein. The processor then is fitted magnetically on the outside and switched on. There then follows a traumatic month when my poor befuddled brain has to learn to interpret the robotic, Donald Duck like sounds that will be created. To speed this learning, I have been told that must take out my trusty right ear hearing aid, desist from lip reading, and MAKE myself adapt! Three days are spent in ChCh for the switch on period (July 28th, 29th, 30th) then there are follow up sessions in ChCh on Aug 4th, 11th and 25th as the MAP is fine tuned more and more.

Then, I will take on the world, literally.... Don and I head overseas on August 26th!!! Once again we will lead another group of Kiwi photographers on an autumn trip in Nova Scotia and New Brunswick, with my week-long workshop included. This time there will be an added challenge. So, I will take on the world with much trepidation. I am so grateful for my lovely Don's huge amount of loving support - HOW would I manage without it!

This is undoubtedly the most massive thing that I have ever done in my life... but all along the way, when obstacles have been put in front of me for various reasons, I have looked back at what I HAD done and said "if I can do THAT, I can do anything". This is the biggest challenge EVER! I know my life will change dramatically. I will even be able to hear the birds again... and the rain on the roof....the world will take on a whole new freshness, and I have been assured by someone very dear (as one "transplant/implant receiver" to another) that I will gain FAR MORE than just additional hearing!

I am reminded - constantly - of a dear old lady whom I came across time and time again when speaking to groups in Chch... I would go up to her and say hello - and say "How is life treating you?"... her eyes would sparkle and she would throw her hands in the air and say "It just gets better and better!!!!", so does mine - ROLL ON the rest of my life!

Love and hugs to you all, Sally.



June 5th

Hi Everyone. Well, the IMPLANT HAS LANDED!

The stage is set

The props are in place

The spotlights are lined up

The orchestra is tuning up

the cymbals ready to clash, the violins ready to screech, the drums ready to deafen, the cellos ready to scraunch, the percussion ready to cause concussion

The sound technician is ready to flick the switch

The audience is waiting expectantly, lolly papers rustling, quietly, and in the wings, getting mentally prepared for the performance is Roger Robot - conductor and the star of the show, Donald Duck, polishing his vocal chords, getting ready to unleash his "song" on the unsuspecting world!

It will be a bit of a long interval, my hearing will not be switched on til JULY 28th.

Then will follow a month of a whole new form of learning.

For now, my right ear will keep me in touch with the world....

I feel very lop sided..... when I closed my eyes in the car yesterday, it felt as if we were veering to the left the whole way - like going in a continuous circle - weird! I feel a bit light headed and woosey - flakey? wafty? airey fairy? but I have had almost no pain, just a thumper of a headache at times (they tell me this is what a hangover is like) Think I will be lying low for a few days though - not dancing the Light Fandango for a bit yet.

I came home yesterday, with a MOST IMPRESSIVE bandage (see attached photo) I had been described as looking like a front row forward. I preferred to think of myself as a Christmas Steam pud, with lots of goodies cooking up a storm inside. (The xray looked amazing, sort-of -ike a butterfly's antenna dancing in my head!)

Today I look less than impressive - my lovely co-pilot has just removed my headwear, and I look like a moth eaten, threadbare old chook with a bad hair day/week - no hair washing for a week. The iodine hair gel makes what hair that is left on the left side of my head, stand up electrically and colourfully - all I need is a bolt or two in my neck to look like Norman Munster! You will NOT see a photo of this stage!!!

BUT it can only get better and better!

I have been overwhelmed with the good wishes, the love, the flowers, the cards and letters, the touching stories that have been passed on, the dozens and dozens of emails... SO good to have you all on board for my amazing journey!

THANK YOU one and all, I am overcome, we are overcome.

Love and hugs to you all,
Sally.

Betty Wilmhurst - Extracts from a Diary



BETTY'S INTRODUCTION.

I was born with a 'Progressive Hearing Loss'.

I was moved from a mainstream Primer School to an Intellectually Handicapped Children's Unit. Also at Intermediate too.

My hearing loss was discovered by the family G.P. after I finished College. I loved School, and always sat at my desk in the front row of the class. When I left College I worked as a Sewing Machine St. Then as a Fashion Clothing Sales Lady. Lastly as a Cafeteria Assistant. I married, and raised a family. I've mixed with hearing children, then hearing adults all my life. And now I am reborn with my Cochlear Implant.

direct talk to me. Couldn't follow Dave & ^{Shawn's} ~~Wynnes~~ conversation in wooden floor hall. Not very crowded though. They were probably talking quickly.
Son's home - baby Pawline loud twangy sound!!!
Kissed baby - ping mechanical sound.
Headache - They spoke to me too loud. And I had to speak up for them.
Rest-Reading - Yoga breaths without EAR on.
Velco straps - on gardening shoes sound tacky.
Wild Bird Seed - pouring into can sounds tinny, then like sand.

sawdust - is soundless (Unless it was damp).
Rolling mix - razor sound as steel trowel going in/out.
Nearly got headache - my friend in rest home doesn't speak read so I had to raise my voice.
Heard husband talking to our cat from inside as he arrived home.
Asked husband what loud RING was??? Fly-screen door slamming in the wind.
Dropped a pin - and heard it rattle.
Water filter - trickle sound in saucepan: Bell-like sound when I dropped an egg in.
Pot made ping ping sound

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on hot plate Heard it above chattering birds. Bubbles, bubble, bubble, as egg boiled.
Down draft - above stove, very noisy. And
Light - clicked on and off.
Egg shells - Crack, Crunch, Crackle.
Brush on wet plastic chopping board - metallic squeak again, and again.
Heard (hall) phone ring I can't hear anyone on it!
Out in van - able to talk and listen with window open!
New tyres - are noisy on the road.
ANZAC CONCERT in Sports Arena: Followed programme with help from Dave.

Couldn't hear the PC: Probably due to poor acoustics. But did hear - nearly last 2 words.
The orchestra was tremendous. Some noisy, but not uncomfortable.
Had to strain to hear - Let There Be Peace on Earth though by Jill Jackson Sy Miller.
Singalong - Asked Dave for help often to find the place. But did hear it sometimes.
In dark car - I spoke to Winifred on purpose. The plan was to practise my listening skills. Heard some. But got stuck when she said 'Lindsay' brought her 3 to stay. Made the mistake of saying pardon.

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So of course she raised her voice! On hindsight I think I should have said 'three what?' (children) Yes!
26.4.10 DAY 8 - 3 mins breath ing' Yoga crunches.
Concert - my brain is going over concert!
Heard Mobile - from other end of house!
When driving - heard metal trailer rattling on road in front. 'Swish, swish' ???
passing railway station ???
I don't seem to hear foot.
Heard van beeping - Just the part turn of key.
Could hear Dave & mates voices from 3 rooms away.

Outdoors - heard Dave from five metres away.
tea-bags - paper sound and leaves sound like sand!
Mobile - beeps when predictive offers a 'Spell' choice. Another beep for msg sent. Heard it beep beep ring.
Heard kitten in a locked room, at the other end of the house. BeAnzo meow. It was happy to be let out it was purring.
Wooden floor - tacky sound of shoe sole, and also bare feet. Clicking sound of shoe laces flicking onto the floor.
Ignition - Heard it 'swish' when I turned key too far!

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SUN 25.4.10 DAY VII
Phone rang - Heard it, Dave answered. Heard his words from 4 metres away.
'ANZAC SERVICE' - outdoors.
Heard birds.
Piped music - drums/symbols.
Loud speaker - clear man's speech Prologue read lady.
Reads heard - followed read service.
Heard last Post.
Floral Tributes - Two Rangers called - 1-2-2-3-3 words.
Heard band - tunes.
Toddler's snack container - click, click, click.
Reading - by Mayor, loud and clear, able to read it.
Piped music - familiar,

like CD.
Prayer - not heard.
Talks by Squadron leader - spoken too quickly to hear.
Lost track - got wrong page.
Heard 4 - 3 words near end.
Prayer - heard - read out.
Lords prayer - heard read out, and spoken.
Familiar - CD again.
NZ an'mem - sang it, and heard it.
Heard - Thanks.
END - Thanks.
Leaving - spoke to Nick and heard him.
Windy - leaves rustling past on the footpath.
Town Hall - I got talking to Shawn. Heard only

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Paediatric and Adult Programme Staff



L to R: Joanne Lake, Pauline Cosgrove-Haggerty, Neil Heslop, Jill Mustard, Shirley Marshall.



L to R: Rosie Giblin, Beth Kempen, Penny Monteath, Anne Courtney, Leonard Healy.

Paediatric Programme

Neil Heslop	Audiologist/Manager Paediatric
Shirley Marshall	Audiologist
Joanna Lake	Habilitationist
Jill Mustard	Habilitationist
Pauline Cosgrove-Haggerty	Administrator
Phil Bird	ENT Surgeon
Daran Murray	ENT Surgeon

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Leonard Healy	Audiologist
Penny Monteath	Rehabilitationist
Rosie Giblin	Receptionist/ Administrator
Anne Courtney	SCIPA/Trust Administrator
Phil Bird	ENT Surgeon
Daran Murray	ENT Surgeon

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MEDIC ALERT

Every Implantee should seriously consider obtaining a medic alert bracelet.

The reason being should one be in a car accident or have a fall, the processor falls off, and they are knocked unconscious, there is no visual cue that the person is the wearer of a cochlear implant. This could have serious implications should they require treatment or hospitalisation.

It is a relatively simple procedure to join which can be done online at:

www.medicalert.co.nz

The cost is \$80 which includes the choice of several different styles of bracelets.

Authorisation for a medic alert bracelet can be obtained from either your GP or Cochlear Implant audiologist.