

March 2013

Hearing Loss Association of America

North Shore Chapter of Long Island

Meeting Location

Long Island Jewish Hearing & Speech Center is located on the grounds of the Long Island Jewish Medical Center.

Enter the grounds from LAKEVILLE ROAD and it is the first building on your left. Free parking is available behind the hearing and speech building; first entrance to parking lot after building. DO NOT go into the main parking building. Go to the Conference room on the Lower Level
270-05 76th Avenue
New Hyde Park, NY
11040.

If you are in doubt as to whether there is a meeting, or if you'd like further information, please call Sal: 718-479-1098.

FYI

Assistive Listening Devices (ALD) are provided at our meetings. Headphones are available in the back. This room is Looped, so those who have hearing aids/cochlear implants can put on their T-coil switch.

Meeting News March 20, 2013

Refreshments and Social Time begins 6:30pm

Meeting begins 7:00pm

Topic: "A Man Of All Seasons"

Speaker: Joel Ziev

Joel D. Ziev earned his Doctorate in Education from New York University and now directs Partners for Access and serves as the lead consultant. He currently serves as an advisor to the Town of North Hempstead on issues of concern to seniors as well as access to programs and services for people with disabilities.

For more than 25 years, Dr. Ziev has served as an effective advocate for equal access for people with disabilities. He has provided disability access and consulting services for towns, villages, organizations and facilities in the New York, New Jersey metropolitan area, as well as, other parts of the country. He has served on many City, State and National Advisory Commissions and panels, including the advisory committee to the New York State Office of the Aging, the State office of Mental Health, the Long Island Alzheimer's Foundation and the Port Washington Senior Center.

Dr. Ziev has organized and chaired many conferences and has published and lectured widely on issues concerning aging, disability access, case management, mental health, service delivery and program development.

Dr. Ziev has developed many innovative techniques for meeting the access needs of people who are physically disabled, as well as for those with hearing and vision loss. He developed, with HUD support, several fully accessible residential and social service program facilities in New York City. His accessibility design work has been featured in the press, professional journals, and on television.



Hearing Loss Association of America

North Shore Chapter of Long Island

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Our Chapter

Our February meeting was very interesting. Our speaker, Dr. Susan Antonellis from St John's Speech and Hearing Center, gave her presentation on lip-reading and speech reading. She also gave a PowerPoint presentation with many pointers on how to use other people's lips, body language, and facial expressions to help us understand what is being said. We usually don't get all the spoken words in a conversation but we can learn to understand what is being said with the help of all the aids that she went over.

There were many pointers on how to use these techniques and ways of improving our capabilities with lip-reading and speech-reading. These are some of the reasons why coming to meetings is a great learning tool. You can read about topics that interest you but being part of a live presentation is the best way to really understand the topic.

The above is why I usually end my column with "See you at the next meeting."

I hope to see you all at the next meeting.

Sal Sturiale

Hearing Aid Shopping Tips

By Ellen E. Schultz

It is a good thing that texting is so popular, because there is a good chance that many retirees will rely on it in lieu of talking to one another. One in three Americans over age 60 and half of those over 85 have moderate hearing loss, according to the National Institutes of Health. After years of people listening to music through earbuds and headphones, that will only get worse.

Yet few people—perhaps not even your parents or other family members—plan for the cost of hearing aids, which can run from \$2000 for a basic pair to more than \$8000 for top-of-the-line models. Nor do they anticipate how hard it will be to obtain a device that fits and works well.

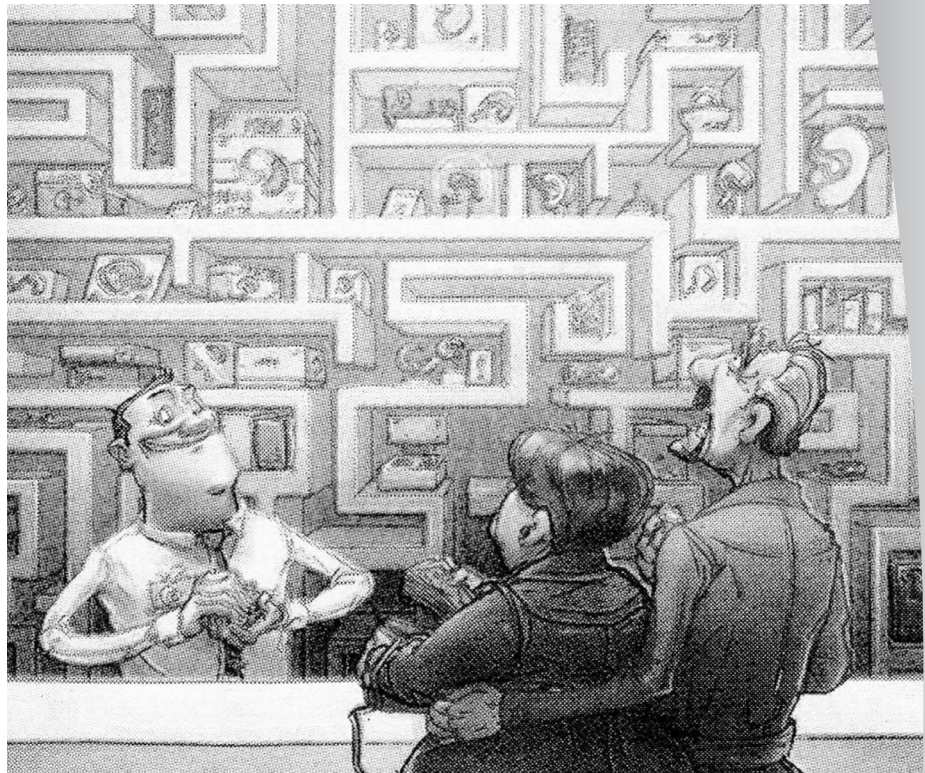
Traditional Medicare doesn't cover hearing aids; it covers only the doctor's exam and audiologist's test. Private health insurance generally doesn't cover hearing aids either, though it might cover doctor's visits.

Federal employees have partial coverage, and veterans can receive hearing aids free of charge. Unions and some employers provide partial coverage, and if you are employed, you can set aside money for hearing aids in a flexible spending account. But for the most part, older people are on their own.

You also are on your own when navigating hearing aid providers, where you risk paying too much for hearing aids that make your life miserable because they don't fit, are hard to operate and overamplify background noises.

Be warned: when choosing among dozens of models and complex features, your guides might be commissioned salespeople who have an incentive to load you up with expensive options you might not need. But there are ways to improve your chances of getting the right devices at a fair price, even if you aren't sure you need one yet.

Continued on Page 4



Hearing loss is subjective and usually self-diagnosed. If you find yourself bluffing when you can't understand what your squeaky-voiced grandkid is saying, putting the TV on so loud your spouse and dog leave the room, or turning on English subtitles when watching DVDs, it might be time to take a look at what is out there.

An otolaryngologist—an ear, nose and throat doctor—will probably confirm what you already know and send you to an audiologist, who will give you a test and tell you the same thing, but will also provide a printout showing how you scored. You can use that as a baseline and to help you when shopping around.

The Hearing Loss Association of America (www.hearingloss.org) has links to dozens of sites with information on finding hearing professionals and advocacy groups, as well as sites for specific groups, such as musicians and veterans.

Hearing aid styles fall roughly into two categories: devices worn outside the ear and those worn in the ear, which are invisible. Both require molds to be made and either close off the ear entirely or provide an “open fit,” letting in lower frequencies that don't need amplification.

Another challenge: selecting features. Some of the newer models have 360-degree scanning, for example, which allows the device to scan automatically for a dominant voice—say, the backseat driver—and emphasize the sound coming from there.

Other options include equalizers, similar to those on MP3 players, and sound-cancellation features, similar to those on headsets that muffle annoying noise.

With Bluetooth capability, you can use a discreet remote control to change volume, turn the device on and off, toggle between electronic devices, answer hands-free phone calls and stream music, sort of like having a miniature wireless headset in your ear.

As you might suspect, getting the right fit and the right features isn't a one-stop deal. For the best outcome, you will need several visits—at least.

Under Federal law, you are entitled to a 30-day trial period. If you sense the salesman is grinding his teeth at your many questions and requests for training, move on.

Premium features can drive the cost of hearing devices to \$2000 or more per ear. Prices ought to have fallen, given advances in technology, but that has happened primarily among new players such as Wal-Mart Stores and Costco Wholesale.

Prices for hearing devices at Costco, for example, run from \$500 for simple models to \$1500 for those with advanced features. Similar models can cost 50% more at some hearing-aid retailers. (An annual Costco membership is \$110 per household.)

Costco provides a free hearing test and product demonstrations. The salesmen don't earn commissions, and with a 90-day money-back trial period, it can be a good way to try new devices.

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Joke Corner

A hard of hearing couple check into a motel and go to bed early. The wife wakes her husband in the middle of the night complaining of a headache. She asks him to go to the car to get some aspirin from the glove compartment. Groggy with sleep, he struggles to get up, puts on his robe, and leaves the room to go to the car—forgetting to put in his hearing aids. He finds the aspirin, and with the bottle in hand he turns toward the motel. But he cannot remember which room is his. After thinking a moment, he returns to the car, places his hand on the horn, holds it down, and waits. Very quickly the motel rooms light up... all but one. It's his wife's room, of course. He locks up his car and heads toward the only room without a light on.

Dr. William F. House, Inventor of the Cochlear Implant, Dies

Dr. William F. House, a medical researcher who braved skepticism to invent the cochlear implant, died on Dec. 7 at his home in Aurora, Oregon. He was 89. The cause was metastatic melanoma, his daughter, Karen House, said.

Dr. House pushed against conventional thinking throughout his career. Over the objections of some, he introduced the surgical microscope to ear surgery. Tackling a form of vertigo that doctors had believed was psychosomatic, he developed a surgical procedure that enabled the first American in space to travel to the moon. Peering at the bones of the inner ear, he found enrapturing beauty.

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