From the President, Helen Grathwohl
Looking ahead to Phoenix, Arizona!
May 15-18, 2019

Our 2019 AM/VI is shaping up nicely; we have secured the DoubleTree Inn by Hilton, located at 10220, N. Metro Parkway E, Phoenix, AZ 85051 for a room rate of 89.00 per night. This is a lovely hotel that was recently redecorated. They offer rooms with two queen size beds or one king size bed. They have a mini refrigerator in all rooms and if needed, they will provide a microwave. There is a lounge and restaurant in the hotel and several restaurants and stores within walking distance from the hotel. They offer a full buffet breakfast for $14.99 per person, but will give all attendees a special price of $8.99 per person. For anyone driving parking is free, and if you are flying in, an Uber ride from the airport is $15 to $20 dollars, depending on time of day.

Phoenix is home to a Mayo Clinic Hospital and the SLP’s and otolaryngologists there are very interested in assisting with the Voice Institute. This is truly a big plus for the IAL.

In my first message in the IAL Newsletter, I asked for pictures to post on our website. To date I have not received the first one. Come on folks!! I need your help!!! I cannot make this work alone!!! I asked for pictures of you doing the things that we have been told we cannot do, so get those pictures out and send them to me.

Have you asked your own SLP if he/she is listed on our website? Let’s get that done as well!!! PLEASE!!!!!!!

Continued on page 10
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About The IAL News

The IAL News is published four times a year by the International Association of Laryngectomees.

Information provided by the IAL News is not intended as a substitute for professional medical help or advice, rather as an aid in understanding problems experienced by laryngectomees and the state of current medical knowledge.

A physician or other qualified healthcare provider should always be consulted for any health problem or medical condition.

The IAL does not endorse any treatment or product that may be mentioned in this publication. Please consult your physician and/or speech-language pathologist (SLP) before using any treatment or product.

The opinions expressed in the IAL News are those of the authors and may not represent the policies of the International Association of Laryngectomees.

IAL Resources

- IAL Brochures
- IAL News order/change of address cards
- Orange Emergency Cards (English)
- Orange Emergency Window Stickers (English)
- "Laryngectomees Loving Life" DVD (35 mins) ($10 donation requested) (May also be watched on website)
- “First Steps” Available to download from the IAL website

Order From: IAL in Atlanta /email

We welcome laryngectomees and caregivers to submit ideas that would be helpful for other laryngectomees.

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We thank all our vendors for their support. Please contact them with your questions/comments and ask if they have any special offers for IAL members. Order from them whenever you have a need.

Contact Allison Reber, office@theial.com, for all updates to the IAL website, club postings, changes to club contacts and professionals, in addition to resources you may need from the IAL office. Thank you!
Old Dominion Graduate Students Get Great Education from Laryngectomees
By Tom Olsavicky

On March 27, 2018, three members of the Virginia Beach Tidewater Lost Chord Club were invited by Instructor, Mrs. Anne Michalek, to speak to 26 SLP Graduate Students at Old Dominion University in Norfolk, Virginia. Joe Marasco has used Esophageal Speech for 39 years, Helen Grathwohl has used a Tracheal Esophageal Prosthesis for 16 years and Tom Olsavicky has used an Electro Larynx for 10 years. The idea of having these three laryngectomees speak on the same occasion is a real benefit to the students. They not only hear our stories, but they get to experience the three primary ways of speaking after a total laryngectomy. This is the third year in a row we have been asked to participate in the classroom environment. Mrs. Michalek stated that without a doubt, it is the most popular class for her graduate students. They get very little training from their class material other than what a laryngectomy is, so when they get a chance to ask specific questions about how it affected our daily lives, why we chose our individual method of speaking, how we shower without getting water into our stoma, etc., it really brings the reality of what they may be faced with in their careers. Of course, not all of them will be dealing directly with laryngectomees; in fact, many will never have to change a TEP, help an individual learn ES or help a person find his/her sweet spot to properly use an EL. But we hope that if they do, they will remember our visit and know that there are Lost Chord Clubs in many areas where they can get more information.

When I was a new "Neck Breather," I quickly learned that because of the limited number of laryngectomees, I was always explaining my situation. I have found that helping newly diagnosed individuals, helping to train our future SLPs, speaking to Emergency Medical Teams, and speaking to our local County and State Police gives me a real sense of accomplishment. There is definitely not enough publicity about a laryngectomee’s way of life after removal of the voice box. So, the more of us who are willing to tell our stories, show people that we have adjusted to breathing through a stoma, and that we do have a full life afterwards, is very important. It not only helps the person with whom you are talking, but it will do so much to boost your own self-confidence and self-healing. I encourage you all to try it and see what I mean.
I had had my first throat cancer in 2002 when I was 49. At that time, my primary care doctor referred me to an ENT. He told me that this ENT was from Viet Nam and asked me if I had any issues with that. I told him no issues as long as he was a good doctor. He scoped my throat and scheduled a biopsy. The biopsy proved positive for cancer. Fortunately, he cut out the whole mass during the biopsy which negated the need for a second surgery. He recommended radiation, which I did. The oncology department at the hospital was only ½ mile from work so the daily routine of leaving work for radiation was not too obtrusive. I was supposed to have 35 treatments of radiation but the last week was Thanksgiving week. That last week, I went in on Sunday and finished my 34th treatment on Wednesday. They let me leave early from radiation for good behavior! We celebrated the end of radiation by spending the long weekend at Myrtle Beach.

After the first series of monthly, then quarterly, then bi-annual exams, I went in to see my ENT only for annual checkups. After 5 years, in 2007, my ENT told me that I was cured of that cancer. At the same time, he told me to participate in the classroom environment. Mrs. Michalek stated that it not only helps the students. They not only hear our stories, but they get to experience the same occasion is a real benefit to the future SLPs.

I was on a feeding tube for 2 months due to a fistula that probably occurred due to the radiation I had in 2002. My TEP was primary, so the feed tube was through the puncture in my neck. My wife Elaine was (and is) my primary caregiver. She was given a 5-minute lesson in nursing by my surgeon who showed her how to pack my “upper wound separation” with sterilized gauze soaked in iodine. After 5 weeks or so, the opening closed enough that I was told I could have some coffee (which tasted so good after 2 months!). A week later, my feeding tube was removed, and I had my first TEP. I was able to speak (albeit garbly) within 30 seconds of installation.

During this whole time, I really had no interest in socializing. My main goal was to make sure that my retirement lasted more than just a couple of months. I did meet one laryngectomee who visited me in the hospital. Also, the Monsignor at our church introduced me to another parishioner who had his laryngectomy performed by my original controls. I had planned on retiring early around or after I turned 60. As the year progressed, my throat was slowly letting me know that something was getting worse. In July 2013, I turned in my paperwork officially announcing my intent to retire at the end of August. At the beginning of August, I finally got another appointment with my ENT.

My ENT spent a long time scoping me. I asked him, “Do you see something?” and his answer was “Uh huh” (meaning yes, he did). The cancer had returned. The hospital he worked at no longer supported laryngectomy operations. Instead, he referred me to a surgeon at the University of Virginia, a teaching hospital. I ended up having my laryngectomy on September 4, 2013 – a mere 4 days after I retired from GE.

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THE IMPORTANCE OF EMOTIONAL INTELLIGENCE IN CAREGIVING

by Caryn Melvin, PhD

What is emotional intelligence (EQ)? The term emotional intelligence first appeared in the 1960s in a paper entitled “Emotional intelligence and emancipation” which appeared in the psychotherapeutic journal: Practice of child psychology and child psychiatry. EQ is defined as “The capability of individuals to recognize their own emotions and those of others, discern between different feelings and label them appropriately, use emotional information to guide thinking and behavior, and manage and/or adjust emotions to adapt to environments or achieve one’s goal(s)”

Per Dr. Travis Bradberry, psychologist and author, people with a high EQ usually exhibit the following traits. They are curious about people, embrace change and know their strengths and weaknesses. They are a good judge of character, difficult to offend, know how to say no and let go of mistakes. They give and expect nothing in return, don’t hold grudges, don’t seek perfection and appreciate what they have. They are able to disconnect, meaning power off electronic devices and they can stop negative self-talk in its tracks. They take care of themselves!

What does this have to do with caregiving? Persons with a higher EQ have been shown to provide better care for their loved ones and are less likely to experience burn out. They feel more fulfilled and less stressed. EQ consists of 5 skills; self-awareness, motivation, empathy, social skills and self-regulation. Let’s examine the 5 skills as they relate to caregiving.

Self-awareness is at once simple and complicated. It refers to understanding your needs, knowing your limits and taking care of yourself. It means saying no sometimes which is difficult for many to do. You may understand that no is the best answer but struggle to actually say it. Self-awareness also means you experience yourself as a unique and separate individual with your own needs and wants that need to be addressed. And you do not feel guilty about that!

Motivation is something most caregivers have. You want your loved one to get better, to take responsibility for their care. You want nothing more than to see

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The capability of individuals to recognize their

Continued on p. 8

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them go back to work, to enjoy the social activities they have enjoyed in the past. You are motivated to take them to therapy, help them practice their method of communication, learn self-care and go to a support group.

Social skills are something that most caregivers have or learn to develop quickly as often you are communicating not only for yourself but also, initially, for your loved one. Social skills are needed as the two of you travel through the community. You need to develop the polite skills to explain to those who are curious and sometimes rude about the way your loved one speaks, looks and sounds.

Empathy is the ability to understand and experience the feelings of another. Your spouse feels sad and while you cannot experience exactly what they are going through you do know what sadness feels like. You can understand the struggle. Empathy is often confused with sympathy. Both empathy and sympathy are forms of having concern for another person’s well-being however empathy is different from sympathy in that sympathy is feeling compassion, sorrow, or pity for what another person is experiencing, while empathy is putting yourself in their shoes. Empathy invites a connection, while sympathy keeps the person at a distance. Balancing empathy with self-awareness can be a challenge. While a higher EQ requires empathy of what your loved one is going through, you need to maintain your individuality and take care of yourself.

Emotional regulation speaks to effectively processing and managing your emotions and the emotional side of caregiving. Emotional regulation does not mean you do not have feelings but rather that you can process your feelings in a healthy way. You can process them in a way that does not interfere with decision making. We have all heard and probably said at one time or another, “I’m so mad I can’t think straight!” Emotion dysregulation impairs cognitive function and our otherwise good judgement.

Self-regulation begins with processing your emotions differently. Emotions need to be acknowledged, not judged. Often we start the self-talk in our head with “I know I shouldn’t feel ______.” Healthier self-talk would be, “I’m feeling _____ and it’s normal. It will pass and I can handle it.” Once you acknowledge and accept the feelings you are experiencing you can create a little distance from them. You can observe them rather than participate in them.

**STOP** In a past article I discussed how Mindfulness Based Stress Reduction (www.palousemindfulness.com) could help with caregiver stress. The One Minute Breathing Space technique helps with creating distance from our emotions. The acronym for the technique is STOP; Stop, take a breath, observe how you are feeling and then proceed however makes sense in that moment. Once you can observe the feelings you can examine what went on prior to the feelings and process them. You can then express those emotions in a healthier way.

EQ is not something we are necessarily born with. But it can be cultivated and improved. Awareness is always the first step toward change.

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I am trying to get our website up-to-date, but the progress seems to be slow. We did get our Board of Directors updated and we do have a full board right now, with the exception of a treasurer. So if you know of anyone who could or would fill that position please pass that name on to me. Our latest board member is Pete Meuleveld from Oregon. His bio is on our website. Welcome Pete.

On a sad note, our devoted secretary, Barbara Nitschneider, lost her husband Bob in August. We all send our deepest sympathy to her.

This will be the last IAL Newsletter our current editor will be doing. Candy Moltz has done a great job for us and I want to thank her for her work and dedication. She has been an avid worker for the IAL and in addition to the newsletter, she has served on the Board of Directors and acted as VI director for a couple of years. Candy, we all thank you for all you have done, and I am sure, will continue to do.

Jewell Hoffman will step in as the Newsletter editor and we wish her much success. Please feel free to send her articles you have written or ideas for things you would like to see or hear about in upcoming issues. Best of luck Jewell, you have some big shoes to fill!

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The IAL Board of Directors and staff appreciates every donation to the association. Your gifts will be used to further the cause of the laryngectomee.

The current donation program listed in the IAL Newsletter was initiated in June, 2011. Prior giving was greatly appreciated but not recorded in the totals listed here.

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**Arizona or Bust**  
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With great pride and humility Romet announces the publishing of our new web site designed for the patient to learn about the features and benefits of Romet Electronic Larynx devices and Accessories. The Romet site was specifically designed to be a learning experience for the patient to be able to read the complete instruction booklet for each Romet product written in twelve (12) native languages from which the patient can select. After reading the instructions the patient is then directed to address any further inquiries directly to the local distributor page of the web site selecting the appropriate local region/country. The patient can then ask further questions or order the product they have selected to use as the new voice for their speech.

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Candy Moltz - a Speech Language Pathologist - has been a consistent volunteer and supporter of the IAL since the late 1980’s, so it was no great surprise that she would step in when the IAL needed a volunteer to become Editor of the IAL News. She has been a support in most any capacity you can imagine for the IAL and our laryngectomee population. Her dedication has been above and beyond the call of most. We simply could not do without faithful volunteers such as Candy Moltz, and want her to know how much we appreciate her stepping in as the IAL News Editor, and the many other capacities where she served. We thank her sincerely for her selfless term as Editor as she retires from the position. Thank you so much, Candy!! You are awesome!

Candy assisted with her first IAL Annual Meeting/Voice Institute in 1990 as co-director in charge of local logistics, when it was held in Dallas, TX. She then assisted in many other VI’s through the years and also helped to create the Texas Laryngectomee Association (TLA) along with Martha Reed and Jessie Heart (both ladies were TX Laryngectomees) under the umbrella of the American Cancer Society (ACS). Ever since then, Candy has served on the Texas State Planning Committee. The TLA has put on 27 excellent state meetings since 1991! I can personally attest to that, because I attended two of those annual conferences as a guest of Martha Reed and Jessie Hart, and once as a guest speaker. Martha and Jessie and I were on the Board of Directors with the International Association of Laryngectomees, and Martha and Jessie knew a great Speech Pathologist when they saw one. That is what they saw in Candy Moltz!

While working at UT Dallas as a graduate clinical supervisor, Candy started an adult practicum site at the ACS for her speech pathology graduate students. Martha Reed and Jessie Hart (two highly respected laryngectomees who used Esophageal Speech) provided weekly group speech lessons at the ACS for laryngectomees in the Dallas area. This was the best experience graduate students could get to learn first-hand about laryngectomees. What an opportunity for Candy to offer her grad students in coordination and cooperation with Jessie and Martha. Laryngectomees don’t have the publicity that other cancer patients do, and it is indeed a blessing to have a great Speech Pathologist, such as Candy, to get more involved to help our population!

After nine years at UT Dallas, a job became available at the Dallas VA Medical Center where there was a large laryngectomee population. Candy jumped at the chance to apply and was lucky enough to be hired where she could work more with laryngectomees. The Chief of her department at the VA understood her commitment to the IAL and the TLA and kindly gave ease for her participation right up to her retirement 23 years later. What a blessing that was for our laryngectomee community!!

Many of the IAL members and the general laryngectomee population do not have or know how to use a computer. Their ONLY exposure about what is going on in the world of LARYNGECTOMES, is the IAL News. It is a unique source specifically for laryngectomees the world over, to keep up with new things that are developed and stories of inspiration! People like Candy and those before her have worked

Continued on p. 15
ENT 17 years earlier. So, I was in contact with 2 laryngectomees.

During one of the many follow-up exams with my surgeon, I did go to a meeting of laryngectomees at UVA. There were 5 of us. It was there that I learned that cancer can be caused by a variety of reasons beyond smoking. One of the persons at the meeting had developed cancer due to Agent Orange that he was exposed to during the Viet Nam conflict. All of us had experienced swallowing difficulties of one kind or another. I found this first meeting to be quite educational.

About 6 months later, I finally joined WebWhispers.org. I had had their brochure for quite a while, but as mentioned earlier, I had no real desire to join anything. Well, I did join. And, I started to explore their website and read the emails from other members. I started to understand that, while there are very few laryngectomy operations compared to other cancers, there are quite a few of us out here who have the same or similar experiences. I found that I could share my learning experiences (such as my first ride on a roller coaster after my operation) or even offer some advice to others based on my limited experiences.

Around the time I joined WebWhispers, I also joined Facebook. I had resisted joining Facebook prior to my retirement but I knew several people that were there. I used Facebook as a means of getting in contact with friends from childhood and others that I had not seen in several years.

Through the WebWhispers email list, I eventually learned of the existence of the IAL. While I did not understand at that time what the Voice Institute vs. the Annual Meeting meant, I decided that I wanted to try to attend the IAL’s conference. So, Elaine and I went to the IAL Conference in Buffalo, NY in 2014. I thought this experience was fabulous! We met so many larys, SLPs and SLP students there. I learned a lot during that week. It was in Buffalo that I met Elizabeth Finchem; she gave me my first experience about Esophageal Speech as a method of voicing. I also met Pat Sanders who was president of WebWhispers. Also, during that week, I was taught how to safely submerge my head under water and swim by Tony Talmich and his wife Laura. At that time, they allowed the SLP students to have hands on training for TEP installations. I tried my first hands free HME during these hands-on sessions.

During the Buffalo conference, I added a lot of new Facebook friends. These included many larys, a few SLPs and quite a few of the SLP students who attended the conference from the University of Western Ontario (London, Ontario) as they were physically close to Buffalo and could attend thanks to Dr. Philip Doyle who teaches there.

I lived in Virginia during my career in GE. I had planned to move to Florida after retiring but my laryngectomy delayed that move. During the early months of 2014 after I had joined WebWhispers, I had learned about the Florida Laryngectomy Association. I started to get the

Continued on p. 16
Dear Sweet Friends

By Leesa Dunn

You are not alone in this battle! Whether you are near or far, you are not alone! If you begin to feel alone, remember that cancer has ups and downs and there will be ups again!!! Hold on and keep fighting!!! You can do this!!! We are here to support you!!! We will offer understanding, compassion, and will lend you our strength if and when you need a little extra. I love this beautiful compassionate good-hearted community. Thank you all for enriching my own journey.

Going through C with people I love has given me an inside view of what it is like to have cancer. My heart has been broken and I have felt helpless, doing all I could but feeling like it still was not enough. I have wanted to take it away or at the very least, share some of the pain and fear. Though I could not take it away, as others cannot for me, I do think we can be here for one another and I KNOW this makes the difference of night and day in the experience of the patient!!! I thought this before, but now that I have been ‘inside’ as the patient, I KNOW for sure that bushels and bushels of the fear and burden can be lifted as we show up, really show up for each other. I KNOW that love, support, and nourishment knows no geographical distances. I have experienced this too many times to count.

I thought I was filled with love and compassion before, but somehow walking through it in this role has opened my heart in an explosion of love for others, those with cancer and those forced to stand, wanting to share the weight and often feeling helpless as someone you love suffers. You are not helpless and your love and care DO matter. You DO make a difference. I wish I could explain how often you are in my heart throughout the day, how watching you provide comfort to each other expands my heart so much. I wish I could explain how often you are in my heart throughout the day and how thankful I am for each of you!

One evening after attending church, my husband and I had a couple of errands to run, one of which was the Post Office. When we walked through the doors of the empty Post Office, one of us saw a Post Office but the other (me) saw a strangely shaped dance floor that we had all to ourselves. I set up the phone camera against some brochures on the counter and asked my sweet husband to dance. I could not stop giggling and since this is far from something he would have done in the past, I was shocked and elated when he laughed and said, “sure!” So we danced and laughed and we were and are so thankful for the whole night. Beautiful and precious moments amidst the storm are not only possible, they are everywhere we look if we can just remember to look. They provide moments of rejuvenating rest within the most difficult sucker punches life can throw at us.

“When you get the chance to sit it out or dance, I hope you dance.” (Leann Womack)

Love,
Leesa

Editor’s Note: Dear Sweet Friends is a new column being introduced this issue. We welcome Leesa and look forward to her insight and inspiration in issues to come.
Hoffman continued from p. 12

hard to provide this line of communication, and keep it alive for the laryngectomées. Producing the IAL News is not an easy thing. It requires cooperation and a leader who brings it all together on a deadline, sometimes working tirelessly. This means they have to make room in their lives to get this done. Thank you again Candy Moltz, and all previous Editors, that have kept this line of communication open for those otherwise unable to access this information on the internet. It keeps them informed, to know what is going on in the world of Laryngectomées, and to keep their spirits up, so that they know that everything will be okay. It lets them know that there ARE other people just like THEM in this world who are living life to its fullest!!

In Candy’s Own Words

I was appointed to the IAL BOD to fill a vacancy in 2012, and shortly thereafter I was voted onto the IAL Board of Directors at the Durham Annual Meeting. At the same time, Charles Moore became the Editor of the IAL News taking over from David Blevins. David had served as editor for a number of years. Charles often asked me to supply articles or find articles to use in the News. He also modernized the IAL News with full color printing. I began routinely soliciting articles and wrote several along the way when Chuck was short of copy. I also was asked to help proof the News before it was submitted to the printer. Chuck had some health issues and resigned as editor in 2014. There was no one at the time to step in and take over as editor, so Wade Hampton, then IAL president, hired Marina Shankle, a journalist who wrote for the Stanley News. Maria also trained Katherine Hampton (Wade’s wife) to use the publishing programs. When Maria was no longer able to help with the News, Katherine and Wade added that to the many hats they wore during Wade’s tenure as vice president, treasurer, and later president of the IAL. Katherine was amazingly talented and schooled in all things computer. She also solicited articles from me and asked me to help with proofing. In late 2015, Katherine was finishing up nursing school. She was ready for a full-time job and was no longer able to continue as Editor. The IAL office was asked if they could help with the News, but they declined in consideration of all the other IAL duties they managed. I volunteered to help out with the job of editor if Katherine Hampton would show me the ropes. Katherine and I worked on several issues together and spent many hours on the phone as I learned to navigate the Publisher program and how to submit the News to the publishing company. It was completely new to me. Katherine was always willing to proof the News and could quickly spot errors in spacing and taught me the finer points of placing the pictures and managing the layout. The Editor’s job was time consuming and there were deadlines to be met! Four times a year it was “Annie Get Your Guns!”

My time on the Board of Directors was truly a learning experience in the workings of this fine organization. While on the Board I served as the VI director for two years, including the Dallas and Newport News meetings. This summer in Orlando, my three-term maximum (6 years) on the Board was met and new members were installed. I agreed to see the four issues of 2018 News to the printer and Jewell Hoffman graciously volunteered to become the new editor beginning in 2019. I have learned so much working on the IAL News and met so many wonderful people who were willing to share their stories and expertise with our organization. Special thanks go to Katherine Hampton for her endless patience and to everyone who provided articles and proofed the content. Best of luck to Jewell as she assumes the role of Editor of the IAL News.
newsletters from the FLA and learned of their conference. We signed up for the FLA conference in 2014. It was held in Orlando about ½ mile from “Downtown Disney” (now known as Disney Springs). We had officially moved to Florida one month before the FLA conference was held.

The FLA conference was like a scaled down version of the IAL conference in Buffalo. However, it had all the nice experiences. I met more larys, more SLPs and local SLP students. I added many of these people to my Facebook friends and still maintain close contact with them. Unfortunately, this was the last of the FLA conferences due to lack of new people willing to support the organization.

During the end of 2014 and into 2015, I was in contact with Pat Sanders and others inside WebWhispers. We also had some contacts within the IAL but most of the communications was through WebWhispers. Elaine and I signed up for the 2015 IAL conference in Towson, MD (near Baltimore). This conference was like the conference in Buffalo – it was close to Towson University (for SLP students) and Johns Hopkins (for hands on experiences between SLP students and lary patients). It was again very educational. I met many more people that I made friends with and added them to my now growing list of Facebook friends. It was in Towson that I was able to show others how to get into a pool without fear. In addition, Pat Sanders asked me to be a delegate to the IAL on behalf of WebWhispers at the IAL’s annual meeting. I have been a delegate for WebWhispers each year since then.

It was at the 2015 IAL conference that Pat Sanders asked me if I would be willing to help WebWhispers with their Facebook group as an Admin. I served as an Admin for their group for the next 2½ years. In parallel with this, I also had joined a few other Facebook based laryngectomee support groups. These support groups have members from all around the world. Each of

Continued on p.17

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**Attention SLPs**

If you are listed in the IAL Directory of Alaryngeal Speech Instructors please check to make sure your information is current. If you wish to be included in this resource, please notify the IAL of your interest to serve as a resource using the same email. There is no cost to you. Report any problems or interest to: office@theial.com

**IAL Loan Closet is in Need**

The IAL has a loan closet available to laryngectomees in need of an electrolarynx. The closet is presently quite low on loaner devices. If you have a spare electrolarynx that you are not using or no longer need, please consider donating your device to the IAL using the actual office address at: 105 Westland, San Angelo, TX 76901.

**Can You Sew or Crochet?**

The IAL office gets frequent calls requesting stoma covers. The office has need of stoma covers that are sewn or crocheted. There are patterns available, and some volunteers who make the stoma covers are quite creative. If that is your talent, please consider making/donating stoma covers to the IAL office. It is a great service project for active laryngectomee clubs. The stoma covers will be carefully distributed to those in need. Mail to: IAL Office, 105 Westland, San Angelo, TX 76902. Thank you.  

Susan Reeves
Isler continued from p. 16

them has different experiences to share.

I was able to repeat the IAL Conference experience in 2016 in Dallas, TX. This conference was a combined effort between the IAL and the TLA (Texas Laryngectomy Association). At each of these conferences, I learned more and more about what happened during my operation; details that I was not aware of before. I could not appreciate these details at the time of my operation, but I can now. So, I continue to learn more, and I meet more people – again, larys, SLPs and SLP students. At this point, many of the student SLPs that I had met in Buffalo and Towson were now becoming professionally certified SLPs on their own right. It was fascinating to me to see this progression in personal careers.

The IAL conference in 2017 was held in Newport News, VA. This was an extremely educational experience as we were able to visit the Hampton University Proton Therapy Institute. This is a state-of-the-art facility that allows radiation to be delivered to within 0.5mm of target and thus protecting non-targeted organs such as the brain, eyes and spinal cord. Not many people are able to view such a facility. Again, the 2017 conference was another way to meet new lary friends and SLPs.

It was at this IAL Annual Meeting that the 2018 conference location in Orlando, FL was being discussed. Since I am physically close to Orlando (about 1-hour drive), I volunteered to help coordinate the activities in support of this effort. This was in conjunction with Bob Herbst who did the early work in investigating facilities and securing the hotel agreement. My wife was a tremendous help with this conference. Together we arranged for color guards for opening ceremonies, putting together center pieces for tables at the banquet and I booked the entertain-

The 2018 IAL conference was as educational as all the previous ones I have attended. Like all the others, I was able to gain new friends. Many of these friends are also on Facebook. I am glad that I was able to help the IAL with this conference.

So, here I am now. I am an Admin for 2 different Facebook groups that support laryngectomees, and I am a member of a total of 10 support groups on Facebook. I would recommend that anyone get directly involved in these support groups. It allows you to share your experiences and to help others, especially those who are about to have or just recently had their laryngectomy. It does not take a lot of time before you become a “veteran” and can be the expert that others need for information.

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