Come Join Our Laryngectomee Family
Reunion in Durham, North Carolina in June!

Our forthcoming Annual Meeting in Durham, North Carolina is shaping up to be a memorable one. You will not want to miss it! The dates for the Annual Meeting are June 7-9, with the Voice Institute starting one day earlier on June 6th.

Those of us who have attended an Annual Meeting are convinced that every laryngectomee ought to come to at least one, and also recommend that every laryngectomee attend at least one Voice Institute as well.

Annual Meeting Chair Wade Hampton and Voice Institute Director Dr. Philip Doyle and their committees have been working to put together outstanding programs (see overview on page 18).

Our headquarters hotel is the gorgeous Sheraton Imperial at 4700 Emperor Blvd., Durham, NC 27703 (I-40 Exit 282 - Page Road). Hotel reservations should be made directly to the hotel at 1 (919) 941-5050. Be sure to mention that you are with the IAL convention. A special web site has been established by the hotel where you can make your reservations and obtain other information on the hotel. We highly recommend that those with Internet access use this special site: http://tinyurl.com/89wt3zl.

A special room rate of $99 per night, single or double occupancy, has been negotiated. This is an excellent rate for a hotel of this quality and in such an attractive destination. The rate is good Monday through Sunday. If you want an extension email Wade Hampton (address is on page 22). Hotel parking is free and there is free high speed Internet service. The deadline for hotel reservations is May 16th.

The hotel features large guest rooms, a very attractive on site restaurant with a full and varied menu, a cafe for light meals and snacks, lobby bar, business center, indoor and outdoor swimming pools (be sure to come and see the always popular water activities session on Thursday), lighted tennis court, fitness center, and more.

Durham is easy to reach via air or surface transportation. The Raleigh/Durham airport (Code RDU) is a major regional hub and is served by almost all domestic airlines. There is a free hotel shuttle from the airport. For those driving, Durham is easily accessible from both I-85 and I-40.

Known as the “City of Medicine” Durham is famous for its Research Triangle Park which is the home of major corporations and research facilities. Several major universities are located nearby including North Carolina State University, Duke University, and the University of North Carolina at Chapel Hill (which will host the clinical portion of this year’s Voice Institute). Durham is also home to a world class medical facility, the Duke University Medical Center and School of Medicine.

IAL AM/VI Registration Deadline Extended to May 6th!

We have said it many times before that no one remains a stranger for long at an IAL Annual Meeting and Voice Institute.
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*Data on file. The study compares Provox StabiliBase to FlexiDerm / XtraBase.

Atos Medical products and expertise are developed in close cooperation with leading institutions, doctors, researchers, speech language pathologists and patients from all over the world. All our claims and arguments rest on the results of clinical studies. Atos Medical started the research and development on the first Provox voice prosthesis in 1987. Throughout the years, we have worked hard to develop Provox as the leading voice and pulmonary rehabilitation system on the market. We continue to allocate substantial resources for product development and training programs for Ear, Nose and Throat specialties. Our goal is clear: Atos Medical will continue to lead the way in ENT.
It is always great to be in the majority for a change and to feel that natural kinship we have for one another that comes from shared experiences. You will feel that you have recharged your laryngectomy “batteries,” return home refreshed and renewed, and begin to look forward to your next opportunity to come join our annual laryngectomy family reunion.

We come for many reasons including to:
- spend quality time with people who understand us
- learn about the latest products designed for our use
- learn just about every development concerning total laryngectomy rehabilitation
- socialize, celebrate, laugh, dance and dine out
- shop and visit museums and tourist/ historic sites
- obtain help with speaking or other rehabilitation problems we may have
- return home with samples and new ideas
- meet the “celebrities” and “stars” in our laryngectomy world including the inventors of the products we use and love, the wonderful vendors we buy from, and some of the best medical professionals in the world in the field of laryngectomy rehabilitation
- get together with old friends and make some new ones
- represent our clubs as Delegates who elect those who serve the IAL and shape its direction
- run for election to an IAL office
- serve on an IAL committee
- enjoy a great learning experience, perhaps combined with a vacation
- and many more

Those who always manage to find time for a little shopping will enjoy the Durham super regional malls, The Streets of Southpoint and Brightleaf Square.

We have also scheduled an evening of baseball to see the Durham Bulls play against the Scranton/Wilkes-Barre Yankees in our own special IAL VIP section (see page 4).

Make a date to join us in June for another fabulous laryngectomy reunion at the IAL Annual Meeting and Voice Institute. The Board of Directors and staff are very excited about this year’s conference program. We think we have another excellent program for both the Annual Meeting and Voice Institute with valuable and interesting topics for our first-timers as well as our AM/VI veterans. We are sure it is going to be another memorable one.

As we always say, we can just about guarantee that you will be glad you came!
Mark Kander is AM/VI Keynote Speaker

The keynote speaker for the 2012 joint session of the IAL’s Annual Meeting and Voice Institute is Mark Kander. A graduate of Ohio State and George Washington Universities, Mark is the Director of Health Care Regulatory Analysis of the American Speech-Language-Hearing Association (ASHA). He assists SLPs with billing issues and will be speaking on Medicare and Medicaid reimbursement for supplies and treatments laryngectomees need.

The IAL has worked together with Mark and ASHA to get Medicare to change their reimbursement rules for the indwelling prosthesis and on other issues. We hope to work on additional joint ventures in the future. Having SLPs on our side (and we on their side) should prove to be mutually beneficial.

Night of Baseball set for Annual Meeting

If you are coming to the Annual Meeting and Voice Institute in Durham you won’t want to miss the special opportunity we have arranged for Friday night, June 8th. Come join us for a night of baseball as the Durham Bulls face the Scranton/Wilkes-Barre Yankees. The players on both teams are just a phone call away from major team play and the skill level is excellent. The movie “Bull Durham” was filmed at the stadium.

The IAL has arranged for bus transportation. The total cost is $22.00 and includes a two hour buffet and VIP seating behind the bullpen. The game starts at 7:05 P.M. Be sure to sign up for this special night at the IAL table. Tickets are limited to the first 60 who sign up. Join us for a night of fun!

Treasurer Wanted

The IAL is looking for someone to serve as treasurer of the organization. Currently Vice President Wade Hampton is serving as temporary acting treasurer and he and the Board would like to find a replacement.

The position is an elected office, although if you would like to make a shorter commitment an interim appointment is a possibility. A background in bookkeeping or accounting is desirable as is experience with QuickBooks or willingness to learn.

For additional information please contact IAL President Bob Herbst at bobherbst@me.com or contact him through the IAL toll-free number 1 (866) 425-3678. You can also fill out the application for running for the office by downloading and filling out the application found here: http://tinyurl.com/7rrz2zd

The deadline for filling an application is March 31st.

Please consider this opportunity to help the IAL continue to serve our laryngectomee community.

Please buy from our advertisers. They support our organization and help keep the IAL News coming to you.

New IAL Video Program Now Available On IAL Website


This informative and very inspirational video production is just under 27 minutes long but manages to include all of the basic information on laryngectomees rehabilitation for those facing the surgery, new laryngectomees and their caregivers.

It is an excellent resource and is also available as a DVD from the IAL (a donation is requested to cover duplication and mailing).
We are pleased to announce that InHealth Technologies and Lauder Enterprises are now working together to provide you with exceptional laryngectomy products and service!

InHealth® Technologies and Lauder Enterprises have established a distribution agreement to offer Blom-Singer® Voice Restoration products to the marketplace. Jim Lauder and his team, located in San Antonio, Texas, have been associated with voice restoration for over 20 years. Jim takes great personal interest in his customers by providing cost-effective medical devices that improve patient “quality of life”. We are excited about the new collaboration and look forward to serving you.
IAL Auxiliary Needs You!

In a continuing endeavor to contribute financial support for the Voice Institute and the Host Club, the IAL Auxiliary will once again be hosting its sales and raffle tables, along with the 50/50 drawing that everyone knows about and loves. In addition, we will be taking in new members as well as renewing memberships. Membership is open to EVERYONE and is two dollars (YES—ONLY $2.00) a year.

The Auxiliary will have a planning meeting (time/place to be determined) where attendees can not only say hello to each other, catch up on what we have been doing since the last meeting, but can also put our plans together to set the sales tables up, and get ready to begin business as soon as the keynote speaker has finished on Thursday morning.

The Auxiliary cannot operate successfully without a team willing to help as well as contribute ideas and suggestions. We will need volunteers to help for all three days. We would really appreciate it if you would sign up when we meet for a morning or afternoon.

Also, for the past three or four years, we have had an auction with Richard Crum [professional auctioneer with Tom Lennox assisting] at the IAL Banquet on Saturday night, and it is always a huge success. We would like to do that again, so if you have something of value that is hard to put a price on but would be good to auction off, please try to advise us prior to the meeting.

If you would like to ship items for the raffle/sales/auction ahead of your arrival in Durham, or if you’re unable to attend the meeting this year but would still like to donate something, you may ship items to:

Terrie Hall
4167 N NC Hwy. 150
Lexington, NC 27295-7248
(336) 731-3635

We look forward to seeing you in Durham, NC! Be sure and make your reservations early and have a safe trip!

Caring for a loved one with cancer

By Itzhak Brook, MD

Being a caregiver for a loved one with a serious illness such as head and neck cancer is very difficult. It can be extremely hard to watch their loved one suffer especially if there is little that they can do to reverse the illness. It can be physically and emotionally very taxing. Caregivers should, however, realize how important what they are doing is even when they get little or no appreciation.

Caregivers often fear the potential death of their loved one and life without them. This can be very anxiety provoking and depressing. Some cope by refusing to accept the diagnosis of cancer and believe that their loved ones illness is less serious in nature.

Caregivers often sacrifice their own well being and needs to accommodate those of the person they care for. They often have to calm down their loved one’s fears and support them despite being often the target of their vented anger, frustrations and anxieties. These frustrations may be exaggerated in those with head and neck cancer who often have difficulties in expressing themselves verbally. Caregivers frequently suppress their own feelings and hide their own emotions so as not to upset the sick person. All of this is very taxing and difficult.

It is very useful for the patient and their caregivers to openly and honestly talk to each other sharing their feelings, worries, and aspirations. This may be more difficult in those who have difficulties in speaking. Jointly meeting with the health care providers allows for better communication and facilitates shared decision making.

Unfortunately the well being of caregivers is frequently ignored as all the attention is focused on the sick individual. It is essential, however, that the needs of the caregivers are not ignored. Getting physical and emotional support through friends, family, support groups, and mental health professionals can be very helpful for the caregiver. Professional counseling can be an individual or joint one with other family members and/or the patient. They should find time for themselves to “recharge” their own batteries. Having time dedicated to their own needs can help them continue to be a source of support and strength for their loved ones.

Dr. Brook

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Something Every Laryngectomee 
(and Caregiver) MUST Know 
Opinion

By David Blevins

I would like to believe that any time I am around doctors, nurses, SLPs, EMTs or any other health care provider that I can relax and be assured that they know how to treat me as a laryngectomee. But I and many other laryngectomees have discovered that this is just not the case. Indeed, I think it is safer to assume they do NOT know how our breathing anatomy is different from their other patients than assume they do. The reason is that there are so few of us in the general population and many health care providers have limited training about us (especially our unique breathing anatomy) and/or have any prior experience in treating us. As with so many things, you lose what you don’t use, including knowledge.

Based on my own experience (and that of a large number of other individuals I have run across over the years) the biggest danger laryngectomees face is medical providers not understanding how we breathe, or at minimum, needing to be reminded. In some situations a failure on the part of medical personnel to understand how we breathe could have the most serious consequences including brain damage and death.

For this reason I believe it is essential that every laryngectomee and his or her caregiver fully understand our changed breathing anatomy so that we are in a position to remind people who are trying to help us that we do not breath like other people and require modifications that differ from the way they treat their other patients.

A basic understanding of our changed anatomy is shown in these two drawings:

![Before Laryngectomy](image1)
![After Laryngectomy](image2)

The figures to the left show the process of exhaling air from our lungs. In inhaling the direction of the arrows would reverse.

Before becoming laryngectomees we breathed through our noses and mouths as indicated in the drawing on the left. The laryngectomy surgery permanently cut off those pathways so that now we ONLY breathe through the hole in our necks (our stomas) as shown in the drawing on the right.

The mistake some medical personnel make is to confuse us with tracheostomy (“trache”) patients. These are individuals who IN ADDITION TO CONTINUING TO BREATHE THROUGH THEIR MOUTHS AND/OR NOSES to some extent, also have a hole in their necks, a trache. This tracheostomy makes their breathing easier and is needed due to some condition that reduces airflow through the nose and mouth. But laryngectomees have NO airflow through their mouths and noses to their lungs. Oxygen supplied through a face mask covering the mouth and nose can NEVER reach our lungs. If we need oxygen a mask over the nose and mouth does nothing to give it to us. There is NEVER a medical reason for a total laryngectomee to have an oxygen mask put on their nose and mouth. Anyone who puts one on a laryngectomee...
At Lauder - The ElectroLarynx Company™ our most important goal is to make available the very best speech aids and laryngectomee products to our customers at fair prices.

Our company began when my father Col. Edmund Lauder self-published his book, "Self Help for the Laryngectomee." Col. Lauder was himself a Laryngectomee; thus bringing needed experience and clarity to the project. Throughout the years, this book has become an indispensable guide for laryngectomees and those who care for them.

In 1990, when I was planning to print and update my father's book, I felt I could further serve his customers by offering the best products available today for the laryngectomee.

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All my best,
Jim Lauder
is making a potentially fatal mistake. If we need oxygen it MUST be delivered through our stomas only.

Luckily, my only personal experience with this problem was when I was going to have surgery not long ago. I needed to explain to the anesthesiologist that I breathed only through my stoma and he would have to use that pathway only to provide me with oxygen, and to keep my stoma clear of mucus. I also explained what it was and told him not to remove my voice prosthesis unless absolutely necessary, and if he had to, to replace it with a red rubber catheter. He had never run across or treated a laryngectomee before. Lucky for me, he believed what I told him.

Laryngectomees and family or other caregivers must know this and be on guard in any situation involving the administration of oxygen or any potential blockage of the stoma. We have also heard of several cases where medical personnel were going to give a breathing test to laryngectomees and were preparing to cover the stoma. Again, they are making a potentially deadly mistake by working on the assumption that we are patients with traches.

We also need to do our best to warn medical personnel that we are “total neck breathers” in case we are unable to speak for ourselves or do not have anyone to speak for us. I personally believe that every laryngectomee needs a minimum of two ways to communicate our oxygen needs, with one of them being a Medic Alert bracelet with the words “Laryngectomee - Total Neck Breather” on it (plus any other serious medical condition such as being a diabetic or allergic). The more conspicuous designed (the football shaped one) the better. Another excellent idea is to have the orange warning sticker on the right and left rear windows of our cars. They are available free from the IAL.

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**Donors Give in the Name of Others**

The IAL has a program that invites individuals, clubs and others to contribute to the IAL in memory of those who have left us, and to honor others we feel are worthy of recognition.

**DONATIONS**

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You may make your (U.S. tax deductible) donation via regular mail by sending a check along with the name of the person you wish to remember or honor to IAL, 925B Peachtree Street NE, Suite 316, Atlanta, GA 30309; or make it through the web site at http://www.TheIAL.com.

Each donation will be privately acknowledged and also posted on the IAL web site and periodically acknowledged in the IAL News by donor (unless you wish to remain anonymous) along with the name or names of those who are being honored. Thank you!
For fifteen years, Ceredas has been offering laryngectomees its expertise and capacity for innovation in order to improve their daily well-being. Robert Beziocat, himself a laryngectomee, is the man behind the establishment of our company. He was dissatisfied with the protective systems available at that time, so he used his inventiveness and technical expertise to launch the Cyranose® HME® in 1995. This light, comfortable product effectively addresses the impacts of laryngectomy surgery, in particular the inability to filter, warm or humidify the air breathed in. It also has some decisive qualities related to the properties of the medical stainless steel.

2005 saw the launch of Tracheoclean®, a disposable system that protects the upper respiratory tracts, is easy to position and requires no special maintenance.

Designed for laryngectomees and tracheotomees, Tracheoclean® can be used by patients who are in the postoperative period and after their return home.

Finally, today we are complementing our product range with Cyranose® Global System, a series of devices made for laryngectomees, with or without a voice prosthesis, and designed to remain with them during their entire lifetime.

*Heat and Moisture Exchanger*
Caregivers - Trading Places

by Gerry Rice

Is there a formal definition for being a caregiver? If there is, I imagine my husband, Del, and I are at opposite ends of that definition. And yet, we both know we are in each other’s corner 100%. It’s never been an issue even though we are so different. I’m an extrovert, independent. Del is introvert, dependent. We are both optimistic and resilient.

We were married in 1961. He was 28, I was 22. He was an engineer and I was a number cruncher. It didn’t take long to discover that Del was more than a guy with sex appeal and I was more than a gal with a great butt and never ending legs.

At a young age, I developed a neuromuscular disease which started out as a tremor in my right arm. At 23, I developed blephorospasm (constant involuntary eye blinking). At 25, I developed migraines. I was 28 when my spine began to spasm. Del never considered me handicapped so neither did I.

We raised two children. We camped, boated, ballroom and square danced, dirt biked and skied. Del coached the kids’ soccer, baseball/softball and football teams.

He often teased me about my having the ability to pour several cups of coffee at once. We maintained a sense of humor and were not above laughing at the absurdity of my illness. I have a brittle and prickly personality and living with me takes a very special man. He put up with comments from macho men friends about marrying someone “normal”. He is fiercely loyal and being a caregiver comes naturally to him.

I required learning about it. In 1971, Del broke his back in 3 places. He was paralyzed for several days, was depressed and needed positive reinforcement. After six months he regained his mobility and strength. It was my turn to get some nasty comments from coworkers about my sex life with a sick husband. Stress and anxiety can come from the strangest places.

Being a caregiver during illnesses requires unique handling for each situation. Giving and receiving TLC from each other is never ending. Del is the better caregiver. I have been known to call it hovering. I, as a caregiver, have little patience and get really grouchy. I think it is because I will not admit to Del’s illnesses. I’m a realist but not with him. We both strive to keep a positive attitude: a little depression, a little feeling sorry for ourselves and then back up and at’em.

In 1978 we moved to Richland, Washington from Placentia, California. We experienced the normal ups and downs. Our children grew to be mature responsible adults and began their own families. And, then, Del’s face was white as a sheet when he found blood in his urine. He was diagnosed with bladder cancer and had surgery in 1987. He was so cool with the diagnosis and surgery; I barely knew what was happening. He kept it from being more than a blip in our life.

In 1990, he quit smoking. He announced one day he would probably be in a crabby mood for awhile. He never had another cigarette even though I stupidly kept smoking. Was I a responsible caregiver during that time? No! Did I care? Oh, Yes!

In 1991, illness again hit Del. He had a heart attack which led to a triple heart by-pass. Richland is a small community so surgery was performed in Spokane. The day after I got him home he insisted we go to our favorite winery for his favorite wine. He was back and I was learning to cook in a heart healthy way. Well, sort of.

Del called me in 1994 saying he was having trouble focusing. I took him to our family doctor with many specialty doctors visits to follow. After several months of tests the diagnosis was Multiple Sclerosis.

We experienced shock and disbelief. Weekly injections to slow down progression of this ugly disease began. Because of my permanent arm tremor, I could not administer the injections but became expert at preparing them and telling Del to “take that needle and shove it”. He “gets” my sense of humor. I was a wealth of encouragement. The MS did go into remission and life got back to normal. Normal was changing though.

Retirement, golf, grandkids, golf, condo living, golf, socializing, golf, all was enjoyable and satisfying.

Through the years I had seen several neurologists regarding my arm tremor and eye spasm, but had done nothing for years. My tremor worsened so I learned to write with my left hand. The tremor moved to my neck. Del always went shopping with me so I wouldn’t have to write the check. In 1996, I saw yet another neurologist and after several tests was told I had, Early Onset Generalized Dystonia. My gosh! There is a name for it!

Continued on P. 14

Gerry and Del Rice with daughter Dianna (Dedi) Rice Wheeler
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Fortunately there was no cure. Several very strong medications were tried with no success, and a lot of drastic side effects. Del, my calm, cool caregiver, put up with many weird mood swings and reactions but many times wanted to give me an upper cut.

In 1998 I learned of a fairly new surgery performed to stop the eye spasm so off we went. This husband of mine has put so many hours in a waiting room, he could qualify for that as a full time job. Patience is definitely his virtue. After surgery, I could for the first time since I was 23, keep my eyes open. What a joy for both of us. We had for so many years shared the fear that I would miss seeing the kids get into trouble or some such thing.

Relying more and more on each other became the norm, which in itself is normal. Three back surgeries from 1997 to 2001 put me in bed the better part of those years. Del was so attentive; he never made me feel that I was a burden. He golfed every morning and came home to take care of me and business. After each back surgery I got physical therapy only to have my deteriorating back renew its attack. The Dystonia was in my spine. In January, 2001, it was back to Spokane for anterior/posterior back fusion. Del could make that trip in his sleep. By September, 2001, I was feeling better than I had in years. And then............

A sore throat was developing. It continued throughout the winter and by March 2002, I could barely carry on a conversation without great pain. My ENT gave me the bad news and thus started the most difficult period in our lives. The big C. Chemo, radiation, hospitalization with a near death experience. A stroke in my cerebellum while hospitalized. Learning to balance and walk again. Having our days dictated by the tube feeding schedule (I could not use the g-tube myself because of my tremor so Del had to feed me). Another round of chemo and radiation, only to be hospitalized again with neutropenia and then the decision to have a laryngectomy. Oh, how we agonized over that decision. How could I have possibly survived without Del, his strength, love, assurance and steadfastness? I was able to lean on him and he never let me down.

Over to Seattle for surgery. Our kids came. David took Del to Hooters and was a caregiver to him. Dianna held my hand. Del kept assuring me I was still me even though my head and neck was swollen to the point of resembling a basketball. I survived surgery and found WebWhispers 6 months after becoming a laryngectomee. But, that’s another story and, first, I’ll continue this one.

In February, 2004, Del had an acute MS breakthrough. It happened between going to Arizona to visit his bro and my trip to Cabo San Lucas, Mexico to visit a friend, my first outing by myself in years. Del understood my need to become independent again and encouraged me to go even though he felt very ill. He never let me know, but the relief written all over his face when I deplaned said it all.

At first he had massive steroid injections. They helped but we noticed his eyesight, mental ability, spine, balance, and physical strength waning. Omigosh, did I have the where-with-all to deal with his disabilities as he had mine? Would he have the strength to “keep on trucking” one more time? These and more questions naturally came up. The quantity and variety of medications became mind boggling with side effects unbearable and fickle. Would I be effective in encouraging him to stay active and yet also ease his burdens? So far so good. Recently he told me he feels much better when he is active.

We moved from our beloved condo. In looking at the options we decided that with Del’s health rapidly declining we had better bail and we are now in a wheelchair accessible apartment. It’s very cozy and surprisingly liberating. I bought Del a cane on a whim. He has found it helps a great deal and is very comfortable with it. It’s the little things that help. Obviously, we’ve been trading the caregiver responsibilities back and forth. Del is still the better caregiver. We constantly encourage each other to strive to be more than the sum of the illnesses we have had or are currently experiencing.

After all this time we each know the others strengths and weaknesses and how to work those to best advantage for both of us. Have we been preparing for this level of illness and support since 1961? Nah, we’re making the best of bad situations, one at a time, just like everyone else.

Editor’s Note: This article was originally published in the October 2004 issue of the Headlines newsletter edited by WebWhispers President Pat Sanders.
Global solution for pulmonary and phonatory rehabilitation after a total laryngectomy

American laryngectomees can now fully benefit from the advantages of the Cyranose® HME*. It alone can be cleaned repeatedly, thereby proving cheaper with use. Thanks to the Cyranose® Global System, a Ceredas innovation, the pulmonary and phonatory rehabilitation of laryngectomees with or without a voice prosthesis is now possible throughout their life.

After surgery and during radiotherapy, CyTubeMajor™, a laryngectomy tube and tracheostoma support, receives the Cyranose® HME*. The CyGripOne™ is available for patients requiring a tracheostoma tube. The patented holding tab makes it easy to remove. Users of a voice prosthesis benefit from CyValveFreedom™, a hands-free valve avoiding the manual obstruction of the tracheostoma. Finally, Tracheodouche™, a shower protector, is fitted on the CyTubeMajor™ or the Cyranose® base, allowing for the pleasure of a shower without the risk of discomfort.

* Heat and Moisture Exchanger.

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Another Ceredas innovation distributed in the U.S., Tracheoclean®, the disposable tracheal protection used during the post-surgical period is also unique on the market. Easy and fast to insert, it doesn’t require any special care. It also protects the caregivers while preserving the patient’s self-image.
Our IAL Sponsors

The IAL Board of Directors has established a Sponsorship Program to support the continuation of the work of the IAL.

Individuals, clubs, organizations, foundations and non-laryngectomee product businesses are invited to contribute in any amount. Donations are tax-deductible under U.S. laws. Contributions are cumulative over time with the category increasing by the total amount given. An example is that an individual could start with a donation of $5. When donations from that person reach $50 they would be designated as a “Bronze” level donor.

Please join those who are committed to the continued existence of our nearly 60 year old organization by sending a check today to The IAL, 925B Peachtree Street N. E., Suite 316, Atlanta, GA 30309-3918.

Bronze ($50)
Marion Alexander Mary Bacon
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Bronze ***($150)
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Too much of a good thing?

Many primary care physicians in the United States believe that their patients are receiving too much medical care, and that the pressure to do more than is necessary could be reduced by malpractice reform, adjusting financial incentives, and spending more time with patients, according to a study published in the September 2012 issue of the Archives of Internal Medicine.

Planning to Fly?

Those of us who have flown on commercial airplanes have usually done so without any problems or significant delays related to our being laryngectomees. However, there may be a few things that can make things go more smoothly.

All passengers, including all handicapped individuals and those with medical conditions must be screened by Transportation Security Administration agents. The TSA considers being a laryngectomee as part of this general category since we may need to bring special items we need in our luggage or carry-on bag.

There is a section on the TSA website especially for special needs passengers, “Travelers with Disabilities and Medical conditions.” You can find that here: http://tinyurl.com/7uvlext

While it is not required, you can download from the page above and print out a “Disability Notification Card for Air Travel.” While it won’t keep you from being screened it may help if a question arises about equipment you are carrying. For example, on some scanners a TEP prosthesis can show up as a foreign object. Having the card may help you move through more quickly.

TSA recommends that travelers with disabilities or medical conditions phone them (1-855-787-2227) three days (72 hours) ahead of travel for information about
what to expect during screening. If they anticipate that you might encounter delays because of the equipment you will be carrying they can communicate ahead of time to the airports doing the screening so your information is in their system. Equipment requiring electricity, such as a suction machine, must be battery-powered. AC current is not available on board.

You can also download a free smartphone application called MyTSA from ITunes or other source for applications (see http://tinyurl.com/25sumbr). It can give you basic information about screening but also information including the average wait times for getting through airports security checkpoints. You will need to provide your flight information including the carrier and flight number when using MyTSA.

**Photos of the MyTSA application on a smart phone**

With a little pre-planning by laryngectomees traveling by commercial airline can be as easy for us as for anyone else.

Come to the IAL Meeting in Durham in June and have a wonderful time meeting, greeting, learning, sharing, discussing, enjoying.

Find out about the lighthouse that our fine North Carolinian hosts are so proud of that lighthouses are this year’s theme. Consider including it in your travel plans.

While you’re at the meeting, stop at our table and look over the country’s largest selection of practical and/or attractive stoma covers and filters. DiAnna’s Neck Laces now come in many colors and there are new Buchanans covers made of a thinner material and available not only in white but also beige and dark blue.

Also see our wide selection of Stoma Studs and Tracheostomy Tubes, ElectroLarynges and Supplies, Personal Voice Amplifiers, Phone Attachment and Signaling Devices, Neck Breather Bracelets, Marty’s Favorite Tweezers, Books - and items of special interest to Speech Pathologists.

**Can’t come to the meeting??** Then please look over our web site at www.luminaud.com where you can see most of our products and print out any of the pages from our catalog.

**Don’t have a computer??** Then write, fax or phone and we’ll be happy to answer your questions and send you a catalog.

Luminaud Inc.
8688 Tyler Blvd., Mentor, OH 44060
Ph. 800-255-3408 (works in Canada, too).
Fx. 440-255-2250, e: info@luminaud.com
What Can I Expect to Learn, See and Do at the IAL Annual Meeting and Voice Institute?

In recent years we have been able to provide a one-page abbreviated schedule in the pre-convention issue of the IAL News that listed the major activities by day and time for both the Annual Meeting and Voice Institute in a side-by-side format. A tighter schedule because the convention is being held earlier this year prevents our doing this. However, if you have computer access you can check the IAL web site for the detailed schedule at www.TheIAL.com. Attendees will receive a very comprehensive program when they register that lists all information.

With the exception of a joint meeting on Thursday and some clinical sessions of the Voice Institute (VI), those who come to Durham have a choice to attend either the Annual Meeting (AM) scheduled sessions or the VI ones (space available for VI sessions).

Sessions include a wide variety of topics, services and formats. Wednesday evening features a session for first-time AM/VI attendees. Again this year we have a series of special sessions for spouses/companions of laryngectomees.

Whether you have registered for the AM or VI you can have your speech and hearing evaluated, and get personal speech training regardless of the way you speak or communicate. If you wish, TEP users can get a free prosthesis change and the opportunity to try out a hands-free valve. Many problems laryngectomees face can be looked into by the VI faculty/staff. Every method of speech is covered in multiple sessions. You will learn and be working with some of the world class doctors and speech therapists who are experts in all facets of laryngectomee rehabilitation.

There are sessions on the laryngectomy surgery itself, psychological issues for us and our spouses/companions, heat/moisture/exchange filters and hands-free valves for TEP speakers, primary vs. secondary TEP procedures, tobacco education, intimacy issues, dealing with fistulas, swallowing problems, and panel discussions with medical professions who will answer any question.

There is a demonstration of laryngectomees swimming, a special spouses breakfast, refreshment breaks, examining and trying out laryngectomee products from our wonderful vendors, a Meet and Greet Reception (Wednesday evening), an auction, raffle, optional night on the town attending a buffet and baseball game, and the closing banquet and dance. With the exception of the baseball outing and WW dinner, everything else is included in your registration fee.

If you are a member of the Internet-based support group WebWhispers you will surely want to come to their annual awards banquet (separate pre-registration fee).

The business of the IAL is conducted in committee meetings and Board meetings that are open to all attendees, and at the Delegates Meeting on Saturday morning. Come join us in Durham, North Carolina!

---

### Convention

In the state of North Carolina,
To Durham, a lovely city,
Coming soon is our convention
If you don’t come it’s a pity.
June seventh, eighth, ninth
Are the days that we’re awaiting,
This will surely be the greatest,
That’s a fact there’s no debating.
We have a common cause, you see,
(This “We” means you, the “We” means me),
To cheer and help, where’er he be,
Our fellow laryngectomee.
June seventh, eighth, ninth
Once again these days I mention,
You’ll treasure every moment spent
At the IAL Convention.
(Adapted from a Max Fried poem in IAL News, 1957)

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### Annual Meeting

“Our annual attendance at the convention is a pilgrimage to rededicate ourselves to the cause of the laryngectomee who needs assistance. It is also an avowal to help those who are now going through the same experiences to which we were subjected, the temporary frustration, the uncertainty of the future that too often follow laryngectomy. ‘We come to help others to help themselves, to inspire those who have recently undergone the ordeal of laryngectomy to the extent that they too, in their turn, can be of help.” IAL News, June 1958.
Blom-Singer® HME System
Breathe Easy... It's Affordable

Lauder Enterprises offers acceptance of Medicare Assignment on selected items.

**HME TIP**

Most of those who use the HME (Heat/Moisture Exchange) filter or TEP hands-free valve which includes the HME use a glued on base plate housing. It is glued around the stoma and filter or valve is inserted.

Kirk Swanson of Canada suggests that while his adhesive is drying he warms up the base plate with his hair dryer. He says it makes the base plate more flexible to fit the contours of his neck. The hint works best on rigid type base plates (shown below is the flexible type).

Speech-to-Text Application

Many laryngectomees who are unable to communicate verbally have found programs (including free ones) that will convert something they type into high quality synthetic speech. But some laryngectomees are unable to type for one reason or another.

But is there also a computer application that understands a laryngectomee voice and translate that into writing?

Some larys have reported that the program Dragon works for them, and this includes TEP speech, esophageal speech and possibly from some AL users. The program can learn from your voice, but its accuracy depends on the quality of your speaking voice. Dragon is available on line and anywhere computer programs are sold.
IAL ANNUAL MEETING REGISTRATION

Durham, North Carolina
June 7-9, 2012

If you are a laryngectomee and would like assistance to develop or improve your speech, you should register for the IAL Voice Institute as a Voice Institute Pupil (VIP) and use FORM B (IAL Voice Institute form.) If you have been a laryngectomee for at least two years, have good speaking skills, and would like in-depth instruction in communication methods and related topics in order to serve as a peer-counselor to other laryngectomees, register for the IAL Voice Institute as a Laryngectomee Trainee (LT) and use FORM B (IAL Voice Institute form).

If you are a spouse, caregiver or a laryngectomee not looking for speech assistance as a VIP or becoming a Laryngectomee Trainee, fill out this form.

All others please complete this form to register for the Annual Meeting.

Registration Fee: $90.00 per person (postmarked on or before May 6, 2012)
$100.00 per person (postmarked on or after May 6, 2012)

First Attendee (Please Print) ______________________________________ Laryngectomee? □ Yes □ No

Second Attendee ________________________________________________ Laryngectomee? □ Yes □ No

Street Address __________________________________________________

City __________________________ State/Province________ ZIP ______ Country _______________________

Phone Number (___) __________________________ Email ________________________________

Note: All sessions of the Annual Meeting and Voice Institute are conducted in English, and if needed, you must arrange for your own translator.
□ Check here if you require assistance, have dietary restrictions, or need special accommodations to attend the meeting because of physical limitations. You will be contacted for further information.

You may also register online at http://www.TheIAL.com or via check or money order payable in U.S. dollars to The International Association of Laryngectomees and mail it to IAL, 925B Peachtree Street NE, Suite 316, Atlanta, GA 30309.

Payment by Credit Card:
Please check □ VISA □ MasterCard □ Discover □ American Express (Go to www.TheIAL.com to use PayPal)

Cardholder Name________________________________ Card Number ____________________________

Expiration Date ____________ Security Code ______ Cardholder Signature ___________________

Please register for the IAL Annual Meeting (Form A) OR the IAL Voice Institute (Form B).
Do NOT register for both events. ALSO REGISTER FOR THE HOTEL USING THE INFORMATION BELOW.

The Sheraton Imperial Hotel and Convention Center
4700 Emperor Blvd.
Durham, NC 27703
Phone: (919) 941-5050
Fax: (919) 941-5156
www.sheraton.com/durham

We recommend that you make reservations directly through this web site:
http://tinyurl.com/89wt3zl
IAL VOICE INSTITUTE REGISTRATION
Durham, North Carolina
June 6-9, 2012

If you are a laryngectomee and would like assistance in developing or improving your speech, register for the IAL Voice Institute as a Voice Institute Pupil (VIP) using this form.

If you have been a laryngectomee for at least two years, have good speaking skills, and would like in-depth instruction in communication methods and related topics in order to serve as a peer-counselor to other laryngectomees, register as a Laryngectomee Trainee (LT) using this form. Speech Pathologists (ST) and Graduate Students (GS) should also use this form.

All others please complete FORM A (Annual Meeting Registration form)

<table>
<thead>
<tr>
<th>Registration Fees check one:</th>
<th>On or May 6, 2012</th>
<th>After May 6, 2012</th>
</tr>
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<tbody>
<tr>
<td>□ Voice Institute Pupil (VIP)</td>
<td>$100 (limited scholarships available)</td>
<td>$120</td>
</tr>
<tr>
<td>□ Laryngectomized Trainee (LT)</td>
<td>$100 (limited scholarships available)</td>
<td>$100</td>
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<tr>
<td>□ Speech Pathologists (ST)</td>
<td>$425</td>
<td>$450</td>
</tr>
<tr>
<td>□ Undergraduate/graduate Student (GS)*</td>
<td>$200</td>
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*A 10% discount per student is available for groups of five (5) or more students from the same institution. Groups must be identified to the IAL in advance of registration for approval.

First Attendee (Please Print)______________________________________ Laryngectomee? □ Yes □ No

Second Attendee ________________________________________________ Laryngectomee? □ Yes □ No

Street Address ____________________________________________________

City __________________________ State/Province__________ ZIP ______ Country __________________

Phone Number (_____) __________________________ Email __________________________

Note: All sessions of the Annual Meeting and Voice Institute are conducted in English, and if needed, you must arrange for your own translator.

☐ Check here if you require assistance, have dietary restrictions, or need special accommodations to attend the meeting because of physical limitations. You will be contacted for further information.

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Payment by Credit Card:

Please check □ VISA □ MasterCard □ Discover □ American Express (Go to www.TheIAL.com to use PayPal)

Cardholder Name__________________________ Card Number __________________________

Expiration Date __________ Security Code _____ Cardholder Signature __________________________

Please register for the IAL Annual Meeting (Form A) OR the IAL Voice Institute (Form B). DO NOT register for both events. ALSO REGISTER FOR THE HOTEL USING THE INFORMATION BELOW.

Headquarters Hotel: Sheraton Imperial Hotel and Convention Center, 4700 Emperor Blvd, Durham, NC 27703, Phone (919) 941-5050, Fax (919) 941-5156, www.sheraton.com/durham

We recommend that you make hotel reservations directly at this web site: http://tinyurl.com/89wt3zl

There are a limited number of Batten Scholarships available for laryngectomees who require financial assistance to attend. For eligibility please visit http://www/TheIAL.com or contact

Philip Doyle, Ph.D.,
c/o IAL, 925B Peachtree Street NE Suite 316
Atlanta GA 30309-3918 pdoyle@uwo.ca or vppl.pirl@gmail.com
OFFICERS
Bob Herbst—President
bobherbst@me.com

Wade Hampton—Vice President
WLHampton@windstream.net

Terrie Linn Hall—Secretary
th_fsnc2002@yahoo.com

Wade Hampton—Acting Treasurer

IAL BOARD OF DIRECTORS
Kay Allison
whisperingkay@yahoo.com

David Blevins—IAL News Editor
david6511@aol.com

Tom Cleveland
tcv2137@sbcglobal.net

Elizabeth Finchem
elizabethfinchem@me.com

Sapp Funderburk
csfund@bellsouth.net

Tom Herring - Database Manager
tomherring@embarqmail.com

Candy Moltz, SLP
Candace.Moltz@va.gov

C. W. Moreland
cwmore@hotmail.com

EXECUTIVE DIRECTOR
Susan Reeves, SLP—Administrative Manager
IALED@ThelIAL.com

IAL VOICE INSTITUTE
Philip Doyle, Ph.D.—Director
pdoyle@uwo.ca

IAL NEWSLETTER
David Blevins—Editor, Graphics, Production
David6511@aol.com
3558 Shore Drive Unit 601
Virginia Beach, VA 23455-1714

MEDICAL ADVISOR
Edward Damrose, MD
edamrose@ohns.stanford.edu

IAL WEBSITE
Ron LeClair—Webmaster
www.ThelIAL.com

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- Orange Emergency Cards (English)
- Orange Emergency Window Stickers (English)
- “Laryngectomees Loving Life” DVD (35 minutes) ($10 donation requested)

Order from: IAL, 925B Peachtree St NE, Atlanta, GA 30309-3918;
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