Here is one of the groups who visited the Newport News Mariner’s Museum on Friday afternoon, Left to right: Candy Moltz, Bob Herbst, Mary Henderson, Joe Marasco, Ellie Marasco, Sandy Olsavicky, John Isler, Majella Best, Elaine Isler, Kaaren Smith, Bill Smith, Noel Best and Tom Olsavicky.

A Word from the President

I would like to thank everyone who made this meeting a success. The location and hotel were superb, the support from the Tidewater and Peninsula Lost Chord Clubs was outstanding. Please remember our vendors and use them for your laryngectomee needs. Our vendors are invaluable to us. Kari and Jonathon drove our A-V equipment all the way from Texas and consistently made sure each presentation ran smoothly. Many first-timers told me how much they learned and how much they appreciated the interaction at this meeting. Thank you to all our participants this year. We look forward to seeing you in Orlando next June.

Sincerely, Tom Cleveland
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Dan Konz
youmeinc@comcast.net

Candy Moltz SLP
cmoltz51@aol.com

Dr. Brian Mitchell, DO
Bmitchell@spokaneent.com

IAL Staff
Susan Reeves SLP
Administrative Manager
susanr@reevesrehabinc.com

Website: www.theial.com
Email: Office@theial.com

Mailing Address
The IAL
925B Peachtree Street NE
Suite 316
Atlanta, Georgia 30309

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.

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We thank all our vendors for their support. Please contact them with your questions and comments. Order from them whenever you have a need.

We welcome laryngectomees and caregivers to submit ideas that would be helpful for other laryngectomees.
IAL: 66th Annual Meeting held in Newport News, Virginia
Recap by Lori Simpson, MS, CCC

The International Association of Laryngectomees hosted the 66th annual meeting at the Newport News Marriott City Center in Newport News, Virginia on June 14-17, 2017. The Marriott provided a wonderful venue with great staff support. This year’s meeting consisted of four days of academic and hands-on training, with lively interactions between clinicians, students, laryngectomees and spouses/caregivers. The Voice Institute provided up to 31 hours of continuing education units (CEUs), certified by the American Speech and Hearing Association (ASHA), for the attendees. This was the highest number of CEUs offered to date for the four day conference. The Voice Institute had 16 Speech-Language Pathologists (SLPs) enrolled with the Voice Institute staff from various locations across the country including El Paso, Texas and Cincinnati, Ohio.

Thursday afternoon provided a rare opportunity for Speech Pathologists and students to tour the Hampton University Proton Therapy Institute with Dr. Allan Thornton. Dr. Thornton allowed participants to see treatment rooms as well as listen to in depth explanations on benefits of proton therapy including the process of patient selection, lab testing, and course of treatment.

On Friday morning, speech pathologists and students were invited to Sentara Norfolk General Hospital, where Dr. Karakla and his colleagues provided a host of lectures pertaining to chemotherapy, dental challenges, and need for support and follow-up. Dr. Karakla also provided an opportunity for direct observation of patient stoma and TEP care in his clinic. Students and SLPs witnessed prostheses changes, naso-endoscopy, and voice evaluations.

The students and SLPs ate a box lunch on the bus as they traveled to rejoin the larger group at the Mariners’ Museum in Newport News, VA. The Museum outing allowed the perfect opportunity for laryngectomees, caregivers, students, SLPs, and staff a chance to socialize and get to know each other. This portion of the program also gave speech pathologists a chance to observe laryngectomees communicating in public with family members, novice listeners and each other in public.

The Tidewater Lost Chord Club of Norfolk treated the IAL participants to a Fun Show on Friday night. It featured local talent dressed in costumes, designed by none other than IAL Vice President/Treasurer Helen Grathwohl. It was great fun!

The vendor exhibit at the Annual Meeting is always a wealth of information and this year was no exception. The Vendor Round-About session gave speech pathologists and laryngectomees/family time to learn about the latest products from each vendor in addition to asking questions about specific personal needs.

The IAL Meet and Greet, hosted by InHealth, was well attended on Wednesday evening offering a lovely time in the Rotunda for everyone to socialize! Thursday found most participants at the annual WebWhispers Banquet beginning with their reception, hosted by Bruce Medical. Helen Grathwohl, VP/treasurer of IAL, gave an inspirational presentation encouraging all to smooth the way for new laryngectomees as they learn about their new normal. The IAL Banquet and Awards Ceremony were exceptional along with the dance which followed. Award recipients this year joined past recipients for a picture to kick off the celebration.

Continued on page 17
Scenes from 2017 Newport News Annual Meeting and Voice Institute
THE CAREGIVER’S CORNER
By Caryn Melvin, PhD.
STOP for a Calmer, More Peaceful Life!

Chronic stress appears to be the rule rather than the exception for most of us these days. If you are a caregiver chronic stress is almost a guarantee. With chronic stress comes emotional dysregulation. Emotional dysregulation refers to experiencing high levels of emotion. For example being very frustrated, extremely angry, overly anxious. Emotional dysregulation adds to the chronic stress. And when we experience high levels of stress our physical and mental health are affected and so is our cognitive function.

Cognitive function is the ability to pay attention, remember, problem solve, organize and reason. When we have difficulty remembering where we placed our glasses or the appointment we had and missed yesterday we become frustrated and angry, emotionally dysregulated, and the stress increases. It seems like a vicious circle!

In the last Caregiver’s Corner article I mentioned how Mindfulness Based Stress Reduction (MBSR) could help manage chronic stress. Mindfulness, being mindful, can take many forms. Some people do formal meditation, some take a walk out in nature. Still others may find stress relief in gardening, music, dancing, painting and so on. Being mindful is kicking the brain into neutral so you can re-group and find your balance. There is no wrong way to do it. And there are many ways to do it.

The One Minute Breathing Space technique is one way of kicking the brain into neutral. This technique is described in more detail on the Palouse Mindfulness website mentioned in the last issue. The steps in the technique are simple and easy to remember. If you can remember the word STOP you’ve got it. When you find yourself feeling out of control in anyway, whether it be thoughts or emotions, simply STOP.

S = Stop what you are doing

T = Take a breath (or two or more!)

O = Observe. What is going on? Are you feeling angry, stressed, tired, hungry? Are you tensing up physically? Where is that tension?

P = Proceed. Maybe you can continue with what you are doing. Or perhaps you need a break of some kind. That break may be a nap or a walk. Or it may be you need to take care of yourself by having something to eat or drink.

The One Minute Breathing Space takes you out of the role of participant and places you in the role of observer. This simple switch in the way you are engaging with the situation can prevent escalation or dysregulation. It may not take away the feeling but it does give you a chance to soften it, to step back and breathe and decide your next move from a place that is more balanced and rational.

“If you ask what is the single most important key to longevity, I would have to say it is avoiding worry, stress and tension. And if you didn’t ask me, I’d still have to say it.”

– George Burns

Wishing everyone a little more peace each day!

I am interested to hear any comments you have about Caregiver’s Corner. Please write to me at carynmelvin@gmail.com with any comments or suggestions for topics of future columns or if you would like to share your caregiving story for an upcoming issue.
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Hosting an IAL Conference
By Tom Olsavicky
President, Peninsula LCC

While still fresh in my old mind and to speak to any and all of you laryngectomees that would like to pay it forward for what the International Association of Laryngectomees (IAL) and its clubs have done for you, I would encourage you to volunteer to host an annual conference. I really didn’t know what I was volunteering for or how much work it would be but I figured if I would work on it a little at a time then it wouldn’t be so bad. I can honestly say that it was nothing but a good experience. Oh, I had my doubts about certain aspects that just didn’t seem like it was going to come together. However, with the support and guidance of the IAL Board members, who have years of experience doing this, I think the 2017 Conference in Newport News, Va. was a success.

In these days of dwindling numbers of attendees to any function, I was optimistically shooting for a total number of 150. Much to my surprise, we got 161 who were planning to attend. Not everyone made it due to illness, emergencies, etc. but we did exceed the 150 mark. For those of you who have seen the times when more than 450 have attended, it must seem so disheartening because a lot of good still comes from the dedicated folks who volunteer to speak, teach, or help us in many ways to improve our new way of living.

I was lucky to have two clubs within 40 miles of each other and that gave me several volunteers to help in any way. I really only used four of them, so it gave the others time to enjoy the conference. I was glad to have them near, if I needed to call on them. The Hotel staff and Community Service staff were very helpful and made it much easier than I expected. I also found it easy to find a Color Guard Unit and a Pastor for the opening ceremony. My local Speech Language Pathologist (SLP) had a daughter who I had heard was singing the National Anthem at local football games and she was available for us. All were happy to help, at no charge to our club or the IAL and the Color Guard even supplied their own flags.

Food selection and Transportation arrangements were the two most frustrating things that gave us the most headaches. Mainly because you have to have a firm number of individuals to plan for, yet until the day of registration you are not sure of anything. The hotel wants to buy food, have the appropriate staff and be prepared to provide the proper selections at least two weeks before the folks arrive. Also the venues that require transportation want to know at least a week in advance of your arrival, how many will be arriving. Again this figure is nothing but an educated guess but buses can only handle 55 passengers. Of

Hosting... Continued on page 13
The 2017 Delegates added Two New IAL Board Members

On Saturday morning, the Delegates elected two new IAL Board members. Pictured above from left to right: President: Tom Cleveland, V.P./Treasurer: Helen Grathwohl, Secretary: Barb Nitschneider, IAL Administrative Manager is Susan Reeves. New Board members: Dan Konz and Kyd Dietrich, along with continuing members, Candy Moltz and Brian Mitchell, who also serves as medical director. Thank you all for your service to the IAL!

In Memoriam
Kay Allison was a devoted IAL Board Member from 2009-2012. She was a laryngectomiee for ten years before she lost her battle with cancer June 23, 2017, after recurrence in December 2016. “Kay really looked forward to the IAL Conference each year seeing old friends (staff and other laryngectomies) whom she kept in contact with exchanging ideas. Along her journey she challenged the medical doctors and staff everywhere she went, and never complained about her pain. Her will to live inspired many people over the years.”
Friend—Rich Zimmerman
Most of you will be familiar with the topic of the over-prescribing of opioid pain medications. With recognizable brand names such as Lortab, Vicodin and OxyContin, these medications have been prescribed at increasing rates since 1999. Generic names of these medications such as hydrocodone or oxycodone are often supplied in conjunction with acetaminophen which is generic for Tylenol. Starting in the late 1990’s, pain was felt to be the “new vital sign” and patients in hospitals were questioned regularly about their level of pain. This came hand in hand with increasing levels of this class of medications being used. More evidence has come forth cautioning both patients and providers on the side effects and dangers of opioid medications. Particularly in the setting of treating chronic pain, opioids have been found lacking compared to other methods of dealing with chronic pain. While useful in the acute setting such as immediately after a surgery or traumatic event, studies have shown significant side effects of being on these medications long term. Most, if not all of you, will have great familiarity with this topic. It’s difficult to watch the news without seeing a story related to abuse of these medications or their close relative heroin. Increasing levels of opioids have been linked in communities to abuse and inappropriate drug seeking by those affected by opioid addiction. It’s not uncommon to hear a story of a younger relative stealing the medication of an older or ill family member. Sadly, even in my own practice we have dealt with individuals diverting the prescriptions of their relatives being treated for cancer. What has become clear is that most of us should be discussing the need for chronic opioids with our health care providers to see if there are alternative ways of dealing with chronic pain rather than being on these medications for years on end.

IAL Voice Institute and Annual Meeting Report
Newport News, Virginia 2017
by Candy Moltz

The 66th Annual Meeting of the IAL proved to be an exciting exchange of information and experience between 161 laryngectomees, caregivers and speech professionals. Sixty-nine laryngectomees, 22 of whom were first-timers, 36 spouse/caregivers who attended this year’s meeting. There were 6 certified speech language pathologists who joined us, with two students, gaining an unprecedented 31 hours of professional continuing education hours required for ASHA. Summer school limited the number of graduate students, though five area universities were contacted with informative invitations. Eight different companies supported our efforts, along with three different individuals who generously donated to the IAL cause. A hearty ‘thank you’ goes out to each of them as we could not have had the meeting without our vendors, including; Archer Medical Devices, Atos, Boston Medical, Bruce Medical, Griffin, Inhealth, Luminaud, and Romet. In total, counting staff, there were a 161 in attendance. Thanks to everyone who came and made it such a great meeting!

The shared academic programming served the VI and Annual meeting well. Presentations from 29 staff were excellent and well received. Hampton University
Continued on page 18
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From the New Voice Institute Director

I am very honored to have been asked to serve as Voice Institute Director. I am eager and very excited about our upcoming meeting in Orlando, FL. I welcome all suggestions to help make this meeting the best! The VI is about training SLPs and others but ultimately it is about you!

Suggestions and questions can be sent to our new VI e-mail address, ialvoiceinstitute@gmail.com.

We now have a Facebook page!! The International Association of Laryngectomies Voice Institute. Check it out and ‘like’ and ‘share!’ Come back frequently as we will be posting often throughout the coming months leading up to the meeting in Orlando. The page will have information about faculty, the agenda and some fun facts and history about the IAL and VI that maybe you didn’t know!

I’m looking eagerly forward to the Orlando meeting.

Sincerely,

Caryn Melvin, PhD, CCC-SLP

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course you don’t need a bus for 55 if you only have 20 people riding.

Did all go well? Not exactly, because we had to cancel the swimming demonstration since the night before a person had an accident in the pool causing it to be drained and refilled. It was not ready for our groups’ demo. I’m not sure I would recommend a band or DJ at future conferences because most of the members left when the DJs started because they could not be heard above the music. Of course there were a few who stayed to dance and enjoy themselves but the majority moved to quieter places. Maybe an entertainer for about an hour after the dinner would be more appropriate but tradition has always had a dance.

Bottom line is I learned a lot about planning an event for 100 plus people and I was not over worked or sorry that I volunteered. I feel a sense of accomplishment, and I hope the folks who attended will come again next year. I also hope that more of you out there will decide to take your turn and host one of these annual conferences.

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I still remember the phone call from my Ear, Nose and Throat doctor, Dr. Snyder, in early December of 2015. Although I’m certain the conversation lasted longer than five minutes, I have no recollection of what we talked about after he said the words “I’m sorry, Dan, you have throat cancer.”

My mind went numb. Although I had been preparing myself for the worst, hearing the actual words felt like getting hit on the back of the head with a two-by-four.

I remember calling my wife, Betsy. I managed to keep myself together for that call. “I need to be strong,” I remember telling myself. I sent a text message to my brothers and sister. And then I lost it. After regaining my composure, I left my law office for the rest of the day. There was no way I was going to get anything accomplished after receiving the cancer diagnosis.

Just a month prior to that call from my ENT I had participated in the Iceman Cometh Challenge, the largest (by number of participants) point-to-point mountain bike race in North America. The cross-country race starts in downtown Kalkaska, Michigan, and winds its way roughly twenty-eight miles west through the Pierre Marquette State Forest, ending just outside of Traverse City, where I live. More than 5,000 riders had participated that year.

I took up mountain biking in 2012 as my way of coping with my 50th birthday. It was my own personal version of a mid-life crisis. Turning 40 didn’t bother me, but 50 seemed so . . . well . . . old. I decided that I needed to get back in shape. As a part of that endeavor I decided to take up mountain biking. I also reasoned that if I was going to take up mountain biking I was going to go “all in.” I immediately registered for two mountain bike races. That first year I participated in a total of four mountain bike races. I competed in six races in each of the two following years, continuing to show improvement. By 2015, mountain biking had become my obsession. I participated in nine races, culminating in the Iceman Cometh Challenge.

Although my ride in 2015 was a personal best of just under two and half hours, I had problems during the race. Very early on, less than four miles in, I had a hard time breathing. It felt like my throat was closing in. I initially dismissed it as just being caused by over-exertion and from the excitement of the race. But then I had another problem: I couldn’t swallow water.

Even though I had a very good finishing time, the mid-race breathing and swallowing problems bothered me. They concerned me so much that I paid a visit to my family doctor a few days after the race. After a round of antibiotics failed to cure what had now developed into a sore throat, my family doctor sent me to see my ENT. The phone call from Dr. Snyder happened about two weeks later.

What followed in January through March of 2016 was 4 rounds of chemotherapy and 34 (of a planned 35) sessions of radiation. Unfortunately, my body, particularly my bone marrow, didn’t react well to the treatment regimen. My immune system was compromised. I had two hospital stays, the first one of 8 days and second for 30 days, during my chemo and radiation treatment. I developed a blood disorder, which I still have today. But after a final PET scan I received the news from Dr. Snyder on May 18th that I was “cancer free.”

Despite my newly-developed blood disorder, I was determined to get back on my mountain bike. My first race was the Ore 2 Shore Mountain Bike Epic in Marquette, Michigan. I followed that with two races in September and another in October. The 2016 Iceman Cometh Challenge was going to be my victory lap. My race time didn’t matter. My goal was simply to finish.

But my victory lap was not meant to be. A week before the race I decided to do a pre-ride of the course. Betsy dropped me and my bike off in Kalkaska. I told her I’d see her in a few hours back in Traverse City.

But just a few miles in I started having problems again. I couldn’t breathe. Climbing the hills left me completely exhausted. I had to walk my bike up a few hills that I normally would have no problems climbing. As I took a break at the top of a hill, another mountain biker pre-riding the course stopped and asked me if I was OK. My first reaction was to tell him I was fine. But reality sunk in. I swallowed my pride and confessed that I was having a few problems. I explained to him I was still recovering from throat cancer. I can’t recall the rider’s name, but he offered to ride

Unfinished Continued on P.16
WE ARE LOOKING AHEAD!
IAL 67TH ANNUAL VOICE MEETING
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If there is a club interested in hosting the IAL Annual Meeting during the summer of 2019, please submit your application to the IAL Board of Directors. There are complete directions on the IAL website at www.theial.com. Thank you.

The IAL Financial Report will be uploaded for viewing on the website at www.theial.com. Although it is typically included in the August News there was not enough room in this issue. We will include it in the November Issue of our quarterly newsletter.

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out with me to the nearest road. I sent my wife a text message to let her know what was going on, and my new-found biking companion and I slowly made our way to Broomhead Road. I had only completed fourteen miles. There was simply no way I was going to be able to do the Iceman.

After a return trip to the ENT and a hastily scheduled MRI I received the bad news: My throat cancer had returned. It was located just above my voice box. I had no other options. I needed surgery. My ENT quickly made an appointment for me to see Dr. Matthew Spector of the Otolaryngology Department at the University of Michigan Health System the next day. I had my tracheotomy the following morning. A week later, two days before Thanksgiving, I had my laryngectomy.

It was a complicated surgery. They used skin from my left forearm to create a new throat. Skin and muscle from my left leg was used to replace the tissue removed from my neck. A skin graft was taken from my right thigh and placed where they had removed the skin from my left forearm. It was a six-hour procedure. Seven different surgeons operated on me.

The recovery process moved slowly. It was very difficult for me, as I think it is for every laryngectomee. I was an attorney. My practice requires me to be able to orally communicate. I handled litigation matters and frequently appeared in court. How was I ever going to be able to practice again? Would people look at me differently now that I had this deformed skin on my neck, and scars on my arm and leg? I went through depression. These were very dark days.

But through it all I kept thinking to myself that once I recovered I was going to get back on my bike. I was fairly certain that despite how awful and painful the medical procedure and recovery had been, I could still ride.

The first thing I had to figure out is how to breathe through this hole in my neck. I had attempted a couple of workouts in the workout room in our basement in early March. The problem was that when I got winded I would blow the HME filters completely out of my lary button.

Even the “high flow” filters were too constrictive and I would blow them out. Clearly, using an HME filter wasn’t going to work.

I decided that “buff” around my neck might be the answer. On March 19th, I took my mountain bike down to the TART trail, a local recreational trail, and attempted my first ride post-laryngectomy. It was twelve miles, on a relatively flat, smooth paved trail. It was as difficult as I expected. I was slow. I needed to take lots of breaks. Breathing the cold air in through my stoma was a unique and bizarre experience. But most importantly, I discovered I could ride!

A week later my bike team, McLain Race Team, organized a group ride on the Vasa Single Track mountain bike course. Not wanting to hold my team members up, I asked my wife to ride along with me. Riding on the Vasa Single Track was much more rigorous than the flat route I took on the TART trail. Mountain biking requires you to maneuver through the trees and up and down hills. You need to shift your weight and move your entire body. It was taxing. I needed to stop and rest frequently. About four miles in, after climbing a hill, my body reacted to all of the exertion: I vomited. After taking a long break, off Betsy and I went again. We rode just over eight and half miles that day.

Over the next few weeks I continued to ride and continued to make adjustments. My rides were showing signs of improvement.

But breathing through the stoma while mountain biking was (and still is) a challenge. I’ve tried using bandanas around my neck. I have a few stoma covers (bibs) that I ordered online that currently seem to work the best. (I still haven’t found a real great product out there that provides the same benefits as an HME filter. I’m still experimenting. My mother is currently sewing a modified design making a bib with a pocket for a foam filter out of a tee shirt.)

On Saturday, April 29th, I entered my first race post-laryngectomy. It was a short nine-mile race called The Rust Shaker. I signed up in the “Beginner Men over 18” category – there was no separate category for “laryngectomees.” I finished the race in 8th out of 14 – and first in the laryngectomee category! My time really wasn’t important.

Continued on P.17
Unfinished...Continued from page 16

I finished. No breaks. And although I got very tired over the last two miles I made it up every hill.

But my first real mountain bike challenge took place a week later, on Saturday, May 6th. The Mud Sweat & Beers Fat Tire Fest and Mountain Bike Race is an annual race here in Traverse City. The course route literally runs through my subdivision. Locally it is generally considered to be the first “big” mountain bike race of the season. I had originally signed up to do the “Stout” twenty-four-mile race, but I realized about two weeks before the race, and especially after my experience at the Rust Shaker, that twenty-four miles at this stage in my recovery was going to be too much. At registration the night before the race I transferred into the “Pale Ale” twelve-mile race.

The race, for me, was a success. I finished! Although I had to walk up a few of the hills, I did just fine. I finished in just over an hour. Not anywhere close to being near the top of my category, but a respectable middle-of-the-pack finish. There is no question that I am much slower than I was the last few years before my cancer diagnosis, but to my surprise, I have discovered that I my current overall speeds are faster than when I first started mountain biking.

But the greatest satisfaction from Mud Sweat & Beers came after the race. During the post-race celebration, another mountain biking friend came up to me and gave me a hug, and she told that she was very proud of me. She said that no one would have blamed me if I had decided to give up mountain biking altogether after all I went through. Six months prior I was recovering from surgery in a hospital bed. And yet here I was, racing again.

Will I get through the Iceman Cometh Challenge this year? It remains my goal. There is a lot of conditioning I’ll need to work on. I’m more concerned about my endurance rather than my speed. I’ve rearranged my goals. My finishing time isn’t nearly as important as simply finishing.

I’ll also have to figure out if there is some better way to breathe through my stoma. I’d really like to come up with something that provides many of the same benefits as an HME filter that is still free-flowing. And I’m still trying to figure out my blood disorder. But I’m fairly certain that by early November I’ll be ready. The Iceman and I have some unfinished business.

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**Annual Meeting Recap** continued from page 4.

Awards this year went to:

- Terrie Hall Outliving Life Award: Jim Lauder
- Mary Jane Renner Spouse Award: Vivian Van Hogen
- Dr. Jim Shanks Award: Ann Cyptar
- Dr. Shirley Salmon Award: Cindy Lee Gordish, Byron Kubik
- IAL Candle Lighters Award: David Blevins, Ed.D
- Longevity Award: Barb Nitschneider

After all awards were given the dance kicked off and before the end of the night, Virginia, Maryland, Texas, New York and Florida were well represented to the end. Fun was shared by all!

We look forward to seeing you in Orlando, Florida, June 6-9, 2018!

Lori Simpson
Proton Therapy Institute and EVMS Sentara Hospital were visited by the speech professionals offering added exposure to the medical side of laryngectomy management. A wide variety of topics were formally covered. Truly it was from A-Z in diagnosis, treatment and rehabilitation, with medical and social issues addressed. Cutting edge medical equipment, prosthesis, stoma products, and speech aids were presented by the supporting vendors. Advocacy was presented including information on advanced directives and everything you ever wanted to know about tracheo-esophageal puncture. This year, speech pathologists and graduate students had the opportunity to observe seasoned professionals change a variety of prostheses and HMEs in the hospital ENT Clinic. Later, they learned how to handle TEPs and other products in the hotel by using vendor supplied prostheses, inserters and simulators. HME housings were sampled by applying them to their own neck or hand. Each participant practiced using a variety of speech aids, tried producing esophageal speech and observed every form of communication available to a laryngectomee. The Mix and Match was one of the highest rated activities of the entire meeting. SLPs and laryngectomees/spouses interviewed and shared information about laryngectomees’ experience of receiving a cancer diagnosis, choosing treatment, undergoing surgery and accommodating their voicelessness. Present and future speech professionals learned skills to treat, teach and manage the total rehabilitation of laryngectomees, the stated mission of the IAL. Thanks for coming this year. You all are warmly invited to join this mission in Orlando, Florida next year at the Holiday Inn Buena Vista. Plan your vacation now!
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