California Here We Come!

The 58th Annual Meeting and 49th Voice Institute of the International Association of Laryngectomists will be held in San Mateo, California. The Annual Meeting begins on June 25, 2009, with the Voice Institute beginning one day earlier on June 24th. Both conclude on the 27th.

Many of those who attend will want to come early or stay late in order to take in the sights of San Francisco, which is less than 20 miles away, as well as enjoy everything that beautiful San Mateo has to offer.

The sponsoring IAL club is the Nu Voice Club of San Francisco with the support of clubs from San Mateo, Santa Clara, Marin County, and Santa Rosa. Stanford Hospital will host the clinical portions of the Voice Institute. The IAL Board of Directors expresses its appreciation to former IAL Vice President John E. Ready for putting the San Mateo proposal together.

The headquarters hotel is the San Mateo Marriott at 17 South Amplett Boulevard, San Mateo, CA 94402. Located just five minutes from the San Francisco International Airport, it is a beautiful facility and guaranteed to please. For those flying into San Francisco International, the hotel has a direct shuttle. You can see a photograph of the hotel on page three. The room rate is $109 per night (plus tax) single or double occupancy. It is never too early to make hotel reservations. You may do so by calling 1-800-556-8972. You can also make your reservations on their web site: http://www.sanmateomarriott.com

Be sure you tell them that you are with the IAL group in order to get that rate. The deadline to get this room rate is June first.

You can register for the AM/VI by completing the forms found on pages 18-19.

The IAL’s Annual Meeting Committee under chairman Bob Herbst is hard at work planning an outstanding program. Please contact Bob if you have any ideas for program sessions (his e-mail address is on pg. 23).

(Cont. on p. 3)
Introducing the New
Blom-Singer® TruSeal® Contour
Adhesive Housing

New Addition to HME System

The new TruSeal Contour adhesive housing is the perfect complement to the Blom-Singer HME system and Hands Free Valve (ATSV II).

The new light-weight, malleable material comfortably fits various peristomal anatomies. The TruSeal Contour is offered in three shapes and will stand-up to the rigorous demands of everyday use.

<table>
<thead>
<tr>
<th>REF</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>BE6070</td>
<td>TruSeal Contour, Round, box of 30</td>
</tr>
<tr>
<td>BE6071</td>
<td>TruSeal Contour, Oval, box of 30</td>
</tr>
<tr>
<td>BE6072</td>
<td>TruSeal Contour, Standard, box of 30</td>
</tr>
<tr>
<td>BE6073</td>
<td>TruSeal Contour Sample Kit, 2 of each shape</td>
</tr>
<tr>
<td>BE1055</td>
<td>Blom-Singer HME System Heat and Moisture Exchange Cartridge, box of 30</td>
</tr>
</tbody>
</table>

Learn more about the Blom-Singer HME System by visiting our web site www.inhealth.com

Call us today to place an order at (800) 477-5969

No Rx Required!

Feel the Difference! Call (800) 477-5969 for a FREE material sample.
Come join fellow laryngectomees, spouses, vendors, and medical professionals in beautiful northern California.

Those of us who have attended an Annual Meeting and Voice Institute are convinced that every laryngectomee ought to attend at least one. And many of us come every year, or as often as possible. Even those of us who come every year always feel that we have benefited from returning again and have learned new things and, of course, enjoyed meeting old friends as well as making some new ones. Many of us would never consider missing an Annual Meeting if there is any way we can make it.

We come for many reasons such as to:
- get together with people who understand what we have gone through as fellow laryngectomees. It just feels great to be in the majority for a change, and to feel that natural kinship we have with one another.
- learn about the latest products designed for us. It is not unusual that a major manufacturer will use the Annual Meeting to introduce a new product and you are there to see it up close and perhaps try it out. We also always end up carrying back lots of free samples and literature to use ourselves and to share with others.
- learn just about every development concerning total laryngectomee rehabilitation
- socialize, celebrate, laugh and eat out
- shop and visit museums, and tourist and historic sites
- obtain help with speaking or other problems we may have
- meet the “celebrities” and “stars” in our field such as the inventors of the products we need and love, the vendors we deal with, and the best medical professionals in the world in the field of laryngectomee rehabilitation
- get together with old friends and make new some ones. No one stays a stranger long at any Annual Meeting
- represent our clubs as Delegates who elect those who serve the IAL and shape its direction
- run for election to IAL office
- serve on IAL committees
- enjoy a great learning experience combined with a vacation
- and many, many more

So let’s make a date to meet in early summer in Beautiful San Mateo, California. Use the information on pages 18-19 to register and make your hotel reservations. We can just about guarantee that you will be glad you came!

Do you know the way to San Mateo? A tip from IAL Treasurer Sapp Funderburk.

My apologies to Dionne Warwick who asked in song, “Do you know the way to San Jose?” If you are concerned about the cost of traveling to San Mateo you can save money with one of the lower cost airlines.

At San Francisco International Airport there are four low cost airlines—AirTrans, jetBlue, Midwest and Southwest. At Oakland airport there are Southwest and jetBlue, although I am told this is the least desirable airport of the three. At San Jose (I do know the way!) there are two: jetBlue and Southwest. However, the hotel shuttle is only from SF International. Another way to save is to check alternate departure airports. I can save almost $200 by driving 150 miles to Atlanta to catch a flight. There are outlying parking lots in Atlanta that cost about $25, provide van transport to the airport and parking up to one week for that one price.

I also found a senior round-trip Southwest flight from Atlanta, Georgia to San Francisco for $278, and $225 via Airtran. Make your plans early to get the best deals.
The International Association of Laryngectomees was ably represented by Elizabeth Finchem, Ron Langseth, John Ready, and Sid Young at the StandUp2Cancer star-studded program which aired nationwide on September 5, 2008. The program originated in Hollywood and was aired on all three major U.S. national television networks.

In a report to the IAL Board of Directors Elizabeth Finchem wrote, “The show was incredible! Having lived in the area for many years Ron, Sid and I agreed that we had never, ever seen so many stars in one place before. From the opening with Patrick Swayze and network anchors, the stars kept the show sparking throughout the hour.

We could see all the stars at the phone bank desks, and all the personal comments that linked the segments. We felt like part of the proceedings. I hope you saw the show because it was very moving for us.”

Elizabeth added that “The author of I Can Do This... Living with cancer, tracing a year of hope," Beverlye Hyman Fedd, spoke well and long following the orientation luncheon. We received a copy of her book, a Standup2Cancer CD, and a red Head and Neck Cancer Alliance “tee” shirt.”

Ron Langseth’s sister-in-law, Bonnie Langseth, turned out to be the heroine for getting t-shirts made with the IAL logo for our four official representatives to wear. It turned out to be quite a challenge.

After trying several times to get the IAL logo in a format the printer could use, Bonnie finally ended up cutting and pasting it along with the organization name from the IAL web site. She also somehow managed to get same day service and picked them up just one day before the event.

Elizabeth reported that Bonnie “deserves a thank you from the IAL for service above and beyond to help us out.” Bonnie had been ill for two weeks prior to these efforts. Thanks to Bonnie and all of these representatives who paid their own way in order to represent the IAL in this important fund-raising event.

The event raised more than $100 million dollars. The StandUptoCancer initiative is linked to the American Association for Cancer Research, and their stated goal is to identify and fund what they call “translational cancer research.”

This approach would take the scientific findings of research and then rapidly move them into direct application for patients. Depending on the scope of each funded project, StandUptoCancer will provide up to $15 million dollars over a three-year period to groups working on the projects (which they term “Dream Teams.”) Of the initial 237 ideas submitted, the top 25 emerged, which will be further narrowed. Visit the StandUptoCancer web site here: http://www.standup2cancer.org.

Thanks to Elizabeth, Ron, John, and Sid!

In addition to the IAL, related groups were represented including Support for People with Oral and Head and Neck Cancer, and the Head and Neck Alliance (formerly the Yul Brenner Head and Neck Cancer Foundation.) The IAL’s representatives were Ron Langseth (4th from left), Elizabeth Finchem (6th from left), John Ready (7th from left), and Sid Young (3rd from right). Also pictured are George Chajeski (far right), Lori Hamilton (widow of cancer victim NASCAR driver Bobby Hamilton, far left). SLP Meryl Kaufman (4th from the right.) Others were not identified by the sponsoring organization by press deadline.)
The TruTone™ Electrolarynx is the only instrument available with natural intonation.

- Single Pressure-Sensitive Button, for Natural Expression
- 9v Battery Operation Means No Custom Mail-Order Batteries
- 2 Years of "Drop & Soak" Coverage with an additional 3 Year Limited Warranty Protection*
- Wide Frequency Range, Allowing for Masculine or Feminine Voice Adjustment

Amplify Your Voice!

Now Available!
Low Profile Noise-Cancelling Headset Microphone
The incidence (number of new cases) and deaths caused by all cancers combined have decreased in the United States for both men and women and in most racial and ethnic groups. These are the major findings of the annual report created by the combined efforts of the American Cancer Society, the Centers for Disease Control and Prevention, the National Cancer Institute, and the North American Association of Central Cancer Registries. This is the first time a study has shown the simultaneous decline in cancer incidence in both men and women.

Their first report in 1998 documented the first long-term decline in cancer death rates since the 1930s. The current report provides trends in incidence and death rates for all cancers combined, and for the top 15 cancers among all racial groups. The report also highlights patterns in tobacco use and control and detailed information on the patterns in lung cancer.

The declines in incidence and cancer deaths were lead by declines in the most common cancers in men (colorectum, lung and prostate), and for two of the three leading cancers in women (breast and colorectum). The death rates for lung cancer in women leveled off after decades of increases.

However, for lung cancer rates in women there are large differences depending on the state and region in which individuals live. Lung cancer rates actually increased in 18 states, 16 of which are in the southern and mid-western U.S., where a larger percentage of women continue to smoke. Fewer women smoke in the northeastern and western parts of the U.S. California was the only state with both decreasing lung cancer incidence and death rates for women. The suspected reason is that California has a strong anti-smoking program and emphasis on leading generally healthy lifestyles. California was the first state to create a comprehensive tobacco control program and has made the greatest progress in reducing tobacco use, although Utah continues to have the lowest smoking prevalence due, in major part, to the Mormon religion’s prohibition against the use of tobacco.

However, death rates for certain individual cancers are increasing, including esophageal cancer for men, pancreatic cancer for women, and liver cancer for both men and women. Overall cancer death rates were highest for African-Americans and lowest for Asian American/Pacific Islanders.

Among the cancers in decline for men include lung, colon and rectal, mouth, pharynx, and stomach. Among the cancers in decline among women include breast, colon, rectum, uterine, ovary, cervix, mouth and pharynx.

Black men had the highest cancer rates among all groups of men and white women had the highest rates among all groups of women.

The best educated guesses about the causes of the decline in cancer incidence and death rates include: decreases in the rates of smoking, decreased use of hormonal replacement therapy (impact on breast cancer), and increased cervical cancer screening. Improvements in education and awareness, early detection and improved treatments also undoubtedly account for much of the downward trends. Some of the increasing incidence of some cancers may relate to improvements in detecting them. These include skin, kidney, and thyroid cancers.

“The observed decrease in the incidence and death rates from all cancers combined in men and women overall and in nearly all racial and ethnic groups is highly encouraging,” concluded the authors. “However, this must be seen as a starting point rather than a destination.” They wrote that a dual effort, combining better application of existing knowledge with ongoing research to improve prevention, early detection, and treatment will be needed to sustain and extend this progress into the future.

(Information for this article came from the National Institutes of Health and the Journal of the National Cancer Institute.)

Mr. Lawrence, I am afraid you misunderstood me when we talked about speaking HANDS-free.

(By Judy Greive, [originally published in the November 2000 WebWhispers Journal])

Please support our advertisers. They support the IAL and help keep the IAL News coming to you.
A breakthrough in pulmonary protection.

Designed specifically for the laryngectomee, Micron HME couples the pulmonary benefit of a heat moisture exchanger (HME) with an effective electrostatic filter for reduction of inhaled submicron particles like bacteria, viruses, pollen and dust.

Ideal for times when extra protection matters: during hospital visits, in large crowds, enclosed areas, while traveling or at home. Micron HME is a perfect supplement to 24/7 use of a standard Provox HME cassette.

Breathe easy.

www.micron-hme.com   1-800-217-0025
Meet the New Veep—Bob Herbst

On November 5, 2008 the IAL Board of Directors selected Board member Bob Herbst to assume the position of Vice President following the resignation of John E. Ready who had taken a position with ATOS Medical.

For a supposedly semi-retired person (he is still just in his 50s), Bob is an extraordinarily busy man who divides his time between his home in Connecticut and one in Florida. Just a few of Bob’s many activities and projects have been shared through his decade as a laryngectomee via The IAL News and Whispers on the Web (the newsletter of WebWhispers).

One story focused on Bob and his wife Lesley’s fund-raising activities to establish a scholarship for an SLP (Speech/Language Pathologist) graduate student at Southern Connecticut State University. Bob and Lesley contributed personal money to the fund which would have otherwise have gone for birthday and Christmas gifts to each other. Family and friends contributed more, which was matched by the state of Connecticut. Interest from the fund pays the scholarship each year to a deserving student.

In 2002 an article appeared about Bob’s being one of several laryngectomees who carried the Olympic Torch for the Winter Games of 2002. Bob, who was still working at the time as Vice President of Integrated Industrial Systems of Yalesville, Connecticut, had become a laryngectomee in 1998. Bob quickly mastered traditional esophageal speech and took up running as part of his rehabilitation.

As someone who had always been around water when he was growing up, Bob loved to swim and snorkel. In an article that appeared in 2000, Bob shared his discovery of a flotation device designed for use by fishermen. He even ventures out into the ocean in this floating chair-like device he had discovered at Sports Authority according to recent research, a 15-20 min. nap is better at restoring your alertness than two cups of coffee.

Bob is heavily involved with speaking to students about avoiding tobacco use. He speaks to several thousand students per year, primarily in Florida and Connecticut. His messages to the students are to avoid tobacco and drugs, stay in school, eat healthily and to exercise. With the increasing demands on his time to speak, Bob has also recruited a number of other laryngectomees to speak to students. He reports that his plate is so full that he no longer has much free time to volunteer to speak at new schools.

Bob’s love of the water was more recently shown in his donating several thousand dollars for the creation and installation of two artificial reefs in Florida which bore his name and that of his father, Bob Herbst, Sr. They were placed in the ocean near his Florida home and serve as a habitat for fish. Artificial reefs create more diversity in fish populations for snorkelers, photographers and divers, as well as fishermen.

Bob served as chair of the Executive Director Search Committee and helped us obtain the services of our part-time Executive Director, Susan Reeves.

He also was instrumental in helping to recruit our webmaster, Ron LeClair, who has been busy completely redesigning the IAL web site (see page 15). Bob has also been very generous in contributing financially to the IAL along with all of the time he devotes to our organization.

As Vice President, Bob is very busy as chairman of the Annual Meeting Committee as it works to put together another outstanding program.

The IAL Board of Directors expresses its appreciation to Bob Herbst for his willingness to assume the many duties of Vice President. Thanks, Bob!
WHAT’S NEW?

Something many people have been requesting for a long time: The DeltaNex Cravat in 10 PLAIN colors!!
Great to wear with your striped, plaid, flowered, patterned and Hawaiian print shirts & blouses.

ALSO - Buchanan Protectors now come with a great new SLIDE LOCK (which can be cut off easily if you prefer to tie)

CHECK OUR WEB SITE OR ASK FOR OUR FREE CATALOG.

www.luminaud.com e-mail: info@luminaud.com
8688 Tyler Boulevard • Mentor, OH 44060-4348

Phone 800-255-3408 • 440-255-9082 • Fax 440-255-2250

“ICE”: In Case of Emergency

A legitimate concern for laryngectomees is our need to be identified as “neck breathers” in case of a medical emergency. This is why we wear “Medic Alert” bracelets or pendants, have emergency stickers on our car windows, carry medical information in our wallets, etc.

Still another idea was shared by Raymond Waites and forwarded by Mike Rosenkranz. The suggestion involves laryngectomees who carry cell phones, and the ability of these to store numbers in their memories. Ordinarily, no one would know which of the numbers in the phone should be called.

All you need to do is to put the phone number of the person or persons who should be contacted in an emergency into your cell phone. But rather than put in their name, label it ICE (and ICE 2 or ICE3 if there is more than one person who should be notified.)

Mike’s story of how he was able to use his cell phone to get help after he had taken a fall can be found in the August 2008 issue of the IAL News located here: http://www.TheIAL.com/Main/newslett.htm. In that article he also recommended that laryngectomees carry a list of any medications they take, along with a description of any medical condition or allergies, in their wallets.

Mike lives with his family in Plantation, Florida.

Mike Rosenkranz

Fact – The larynx is the most common location for cancers of the head and neck.
Lillian “Lil” Lauder Dies at age 87


Lillian Lauder’s obituary noted that “to all who knew her Lil came alive whenever she was around people, whether friends, family or strangers.” She lived a full, rich life as a wife, mother and friend to all.

SLP Dr. Shirley Salmon noted, “Lil, as friends called Lillian Lauder, was a staunch member of the IAL. She and her husband, Ed Lauder, attended many IAL Annual Meetings until Ed’s death. Lil was a member of the Ladies Auxiliary and helped establish the sale of items donated by various Clubs throughout the country. The funds accrued from those sales were donated to the IAL Voice Institute to help subsidize their expenses. ‘Off’ stage’ Lil and Ed entertained in their hotel room (at the IAL Annual Meeting). They had snacks and appetizers put together by Lil and drinks for almost anyone attending the IAL Meeting. Always she was warm, generous and caring. What a lovely lady she was.”

SLP Dr. Jim Shanks remembered Lil, “She had a keen sense of family. Her children and grandchildren were everything to her. I can honestly tell you that if Lillian Lauder was ‘for you’ then no one had better be against you. If she was your friend, you truly knew you had a friend, and she was a friend to many.” Dr. Shanks also recalled the Annual Meeting in 1962 where he first met Lil as “a real eye-opening experience...being in awe of the accomplishments Ed was making with the IAL....”

Lillian Lauder is survived by her son Bob, and wife Carol of Austin, son Jim and wife Ann of San Antonio, daughter Sue Lauder Riemer and husband Ira, of Tampa, FL, and grandchildren Rebecca and Devin Riemer and Kelly Lauder, step-grandchildren Kara and Jeremy Minihan, and a great granddaughter, Destiny Minihan, and many more members of her extended family.

The IAL Board of Directors extends our condolences to the Lauder family and many friends. We join them in cherishing and celebrating the life of Lillian Lauder, and particularly the contributions she and her family made, and which her family continues to make, to our laryngectomee community.

Those wishing to remember Lillian may make memorial contributions to the American Cancer Society or the Humane Society.

In Memoriam

Texas Laryngectomee Association 2006 Meeting on YouTube

A very nice and professionally done nearly seven minute videotape on the 2006 TLA meeting is available on YouTube at this Internet address: http://www.youtube.com/watch?v=29d73he_gyQ
It was made with the help of the West Texas Rehabilitation Center/San Antonio and it provides an excellent overview of the meeting and features Jesse Hart, John Ulrich, Tom Holcolm, Leonard Lovings, Carla Lynch, Kay Yetter, Richard Crum, Jim Lauder, and others.
The IAL Board of Directors bids a very reluctant but also very fond farewell to our graphic artist extraordinaire, Karen Rogers Smith. Karen’s position with the IAL News was eliminated by the IAL Board as one of a number of frequently painful cost-saving measures.

Karen debuted her outstanding work with the IAL with her first issue of the IAL News in October 2006. Her last issue was November 2008.

She initially carried the title of “Editor,” but that eventually changed to “Production and Design” when the editing work was resumed by former News editor, David Blevins. Karen also used the services of Melissa Roberts in assisting with design. Amy Bissinger also served as a copy editor for the News working through Karen.

In addition to designing and producing our newsletters, Karen also designed our Annual Meeting and Voice Institute programs.

Karen recently closed down her free-lance design business and took a position with an existing business. She highly recommends her assistant, Melissa Roberts, for any design work you may need. She can be contacted through krsdesigns.com.

In President Tina Long’s letter to Karen she wrote, “In the entire history of the IAL (more than 50 years) it never had a more professional look to its newsletter than during the time you have served in editing/designing it. We very much regret having to give up that touch of quality and professionalism you have provided. Thank you so much for all that you have done for us! It has helped us to reach out and provide comfort, information, and connection to other survivors of larynx cancer.” Thank you, Karen!

Longest Living Laryngectomee?

Who’s the longest living laryngectomee? According to the Guinness Book of World Records, the answer is John I. Poole of Great Britain who had his laryngectomy surgery in 1924. (Unfortunately, the reference below did not state how long Mr. Poole lived.) His biography, by his granddaughter Lynda Franklin, “Soft Words Butter No Parsnips,” is available from wunjopress.com.

A short video of photos on the life of Mr. Poole can be seen here: http://www.youtube.com/watch?v=3YDil-qc-Ik

(Note: We suspect that this record does not reflect the current longest living laryngectomee, but to challenge it someone has to apply to www.guinnessworldrecords.com and provide evidence that they are older.)
Gilbert Wright’s Electronic Artificial Larynx

The November issue of the IAL News included a short article on Gilbert Wright who is credited with inventing the first neck-type electronic artificial larynx in the 1940s. The initial use was for creating sound effects on radio and in film.

The article also included a very long Internet web address where you can see and hear the use of the Sonovox in music in a film starring the Kay Kyser Band, “You’ll Find Out.” A shorter e-mail address to view that film clip is:

http://www.youtube.com/watch?v=kH-krlgo2e8

A popular show, Kay Kyser’s Kollege of Musical Knowledge, aired on NBC television in 1949 and 1950 and featured Kyser’s signature cap and gown. A hit song by his orchestra during World War II was “Praise the Lord and Pass the Ammunition” and can be heard here:

http://www.youtube.com/watch?v=AJFSNTCNjOM

Another use of the Sonovox in a musical film featured the Alvino Rey Orchestra and a talking steel (Hawaiian) guitar puppet performing the “St. Louis Blues.” It can be viewed at this location:

http://www.youtube.com/watch?v=3Z_sERhBw8

Disney used a Sonovox in making a train “talk” in the Dumbo “Casey Junior” cartoon in 1941. It can be seen here:

http://www.youtube.com/watch?v=dZuTWdqhZjg&NR=1

Finally, the Sonovox was also used in music intended for children. Below is a record cover:

IAL Web Site Improves

Thanks to the extraordinary skills of the IAL’s new webmaster, Ron LeClair, (with a little help from many Board members) our web site has both a new name and a new look. The new name is TheIAL.com. The previous name, Larynxlink.com, will be kept and link to TheIAL.com. The new design also features a slick technical design which replaces a hodgepodge which evolved over time. While there are kinks to be worked out, it is a great beginning. Check it out at http://www.TheIAL.com.

Thanks Ron!

Order Postcards Now

 Clubs, clinicians, vendors, etc., should order the number of IAL News postcards they think they will need over at least a one year period. Ordering a larger number will save on postage. These new cards should be able to be used indefinitely since they contain the IAL’s new permanent address.

These postcards are used to sign up new laryngectomees to get the IAL News and to use if there is any change in address for those already receiving it.

When you receive these new cards please discard the old ones since these new ones contain the new permanent IAL address and the old ones contain a number of different addresses.

Place your order by e-mail and state the number you want and the mailing address to which they should be sent to ialhq@TheIAL.com; write us: IAL, 925B Peachtree Street NE Suite 316, Atlanta GA 30309; or phone our Executive Director Susan Reeves at (866) 425-3678 (866-IAL-FORU). Thanks.
From Dr. Death to Dr. Life--Steve Williams

Steve Williams even carried the nickname “Dr. Death” while in college as a collegiate wrestler and football player at the University of Oklahoma. Steve was a four-time wrestling All-American and finished as the NCAA runner-up his senior year after losing a close decision to Bruce Baumgartner. Baumgartner went on to win 18 national titles and two Olympic gold medals. Steve, originally from Colorado, also played football at Oklahoma and counts four bowl games as part of his football playing record including three trips to the Orange Bowl.

After college Steve became a professional wrestler (referred to by some as “sports entertainment.”) He achieved a measure of stardom in the 1990s when he wrestled professionally in Japan along with his friend and occasional tag team partner and adversary Terry Gordy.

It was in 2004 that Steve was diagnosed with advanced throat cancer. Multiple surgeries including a laryngectomy, along with radiation treatments, followed as he moved towards recovery. Since becoming a laryngectomee Steve has sought to be permitted by the various wrestling federations to wrestle again. He did return to the ring in 2006 in a “Smackdown House Show” in Tulsa, Oklahoma.

Steve was recently named as among the top 100 American professional wrestlers.

Steve’s latest claim to fame is an inspirational autobiography written with Tom Caiazzo, How Dr. Death Became Dr. Life. The book traces Steve’s life from his childhood and adolescence, his amateur college wrestling and football career, his stint with All-Japan and New Japan Wrestling, the NWA, WCW and WWF (wrestling federations), to his fight with cancer and how his faith has helped him throughout the stages of his life.


WILY OWL

I’m the Owl, and I scowl
When you throw in the towel-
Fear should be ousted for hope!
Give, so you’ll live-
And don’t be negative
Get a check-up and broaden your scope!

Postpone trips to Heaven
By learning signs “seven”
And don’t take a view that is dim!

Be a wily old bird,
With advice you’ve just heard,
And you’ll never be out on a limb!

Max Fried, IAL News Editor, 1958

(* the seven cancer danger signs)
Opinion
A Future for the IAL?
By David Blevins, Editor

The survival of the IAL is by no means guaranteed. Its survival was certainly in question a little more than ten years ago when the American Cancer Society withdrew its financial support after 45 years. The IAL chose to stand alone rather than be diminished or functionally eliminated.

But through the generosity of laryngectomees, vendors, the late Dr. Ron Hamaker who offered free office space, money left to the IAL in the wills of deceased laryngectomees, the generosity of Frank Batten, Jr. who contributed a significant amount of money the interest of which supports scholarships for the Voice Institute, and careful money management and rising stock market, the organization survived.

Indeed, by 2004, the net worth of the IAL had grown from about $100,000 to over $600,000. That higher sum represented significant amounts contributed by Mr. Batten and left in the will of Elmo Poole, and a rising stock market. Interest on our funds was a significant source of income for the organization. However, at the present time the net worth of the organization is less than half of what it was worth in 2004, or about $270,000. The obvious questions are why and how this happened and the possible consequences. But, more importantly, what can be done about it.

Despite the fact that there are approximately as many new laryngectomees each year (about 10,000 new ones in just the U.S.) the number of laryngectomee clubs has decreased. In 1986 there were 316 IAL member clubs, in 1999 there were 230; but by 2002 the number was just 150. The best estimate based on our research is that there are about 180 clubs in the U.S.; but IAL dues-paying ones number closer to 100. But even if every single club on our current list were to pay its dues, the total income would still be less than $8000. Last year the total collected in dues was closer to $5,000. In short, club dues is declining but, in any case, is only a small amount of what it takes to run the IAL.

The total dues income would not come close to paying the salaries of our two part-time employees (we had tried unsuccessfully to identify a volunteer webmaster). The newsletter costs for printing and postage have gone up at the same time that fewer advertisers buy ads. For example, even with eliminating the over $1500 from the last issue we paid a graphic artist to assemble the newsletter (see page 11), it still cost $3726.01 to print the newsletter you are reading and $2877.19 to mail it. But the income from the ads in this issue is just $5475. This means that this newsletter lost $1128 despite reducing it by four pages and eliminating the cost of the graphic artist. We are continuing to look for still more ways to save money on the News, but in the meantime that $1128 loss on this issue alone must come out of "savings."

What is the Board of Directors doing to cut costs and raise income? Plenty. By the design work for the IAL News being taken over by a volunteer, this saves $8320 per year. Also, even with a short-handed Board of just 11 members, this group has given a total of about $8000 to the IAL consisting of cash gifts and not applying for expenses to which individuals were entitled. Every Board member contributed, and some donate on a monthly basis.

The Board also cancelled its Interim Meeting and chose to “meet” via the Internet for a savings of at least $7500. Additionally, Voice Institute Director Jeff Searl has submitted a pared down budget for 2009 which is $10,000 less than last year’s. The Voice Institute last year lost $11,000, primarily because the ACS provided $10,000 instead of the budgeted-for $20,000 (which the ACS had provided in previous years.) That shortage also had to be paid from savings. The Voice Institute in 1988 had a total of 200 participants. In 2008 there were 64, and this included graduate students who were not part of the Institute in earlier times. The declining numbers of VI attendees doesn’t help balance the books.

The Board replaced a full time Executive Director with a part time one saving the organization $30,000 per year. Also, a Bylaws amendment will be submitted which cuts at least two Board seats in order to save money. The BOD is also looking to create a more effective memorial giving and general donation programs (see page 17), and is looking to several foundations which have a special connection to us.

As you know if you have read my previous editorials, I believe that the IAL is still needed in the same way that local clubs, hospital visitors and the WebWhispers Internet-based support group are needed. We are a part of the system of support our fellow laryngectomees still need. SLPs still require additional training in how to assist us, and our Voice Institute is the most comprehensive offered in the U.S., and perhaps in the world. Many laryngectomees are still isolated and benefit from being able to come together to learn, celebrate, and be with those who understand us.

The ultimate question is whether the IAL can continue to do what it has done and the manner in which it has done it for the last 56 years. Circumstances may have changed, and perhaps permanently, such that the IAL will have to “reinvent” itself and reconceptualize its mission and the ways it delivers on that mission. But regardless, I am convinced that if the IAL and its missions are to survive it will continue to do what it has done and the manner in which it has done it. The survival of the IAL is by no means guaranteed. But through the generosity of laryngectomees, vendors, the late Dr. Ron Hamaker who offered free office space, money left to the IAL in the wills of deceased laryngectomees, the generosity of Frank Batten, Jr. who contributed a significant amount of money the interest of which supports scholarships for the Voice Institute, and careful money management and rising stock market, the organization survived.

Indeed, by 2004, the net worth of the IAL had grown from about $100,000 to over $600,000. That higher sum represented significant amounts contributed by Mr. Batten and left in the will of Elmo Poole, and a rising stock market. Interest on our funds was a significant source of income for the organization. However, at the present time the net worth of the organization is less than half of what it was worth in 2004, or about $270,000. The obvious questions are why and how this happened and the possible consequences. But, more importantly, what can be done about it.

Despite the fact that there are approximately as many new laryngectomees each year (about 10,000 new ones in just the U.S.) the number of laryngectomee clubs has decreased. In 1986 there were 316 IAL member clubs, in 1999 there were 230; but by 2002 the number was just 150. The best estimate based on our research is that there are about 180 clubs in the U.S.; but IAL dues-paying ones number closer to 100. But even if every single club on our current list were to pay its dues, the total income would still be less than $8000. Last year the total collected in dues was closer to $5,000. In short, club dues is declining but, in any case, is only a small amount of what it takes to run the IAL.

The total dues income would not come close to paying the salaries of our two part-time employees (we had tried unsuccessfully to identify a volunteer webmaster). The newsletter costs for printing and postage have gone up at the same time that fewer advertisers buy ads. For example, even with eliminating the over $1500 from the last issue we paid a graphic artist to assemble the newsletter (see page 11), it still cost $3726.01 to print the newsletter you are reading and $2877.19 to mail it. But the income from the ads in this issue is just $5475. This means that this newsletter lost $1128 despite reducing it by four pages and eliminating the cost of the graphic artist. We are continuing to look for still more ways to save money on the News, but in the meantime that $1128 loss on this issue alone must come out of “savings.”
**Want to Stop those Annoying Calls?**

Want to stop those annoying phone calls from telemarketers? Despite Internet rumors to the contrary, if you have registered for the U.S. government’s National Do Not Call Registry it will remain permanent and you do not have to re-register for your home or cell phone. One of the false rumors being spread on the Internet recently was that cell phones were about to be assaulted by telemarketers using automatic telephone dialers.

The National Do Not Call Registry gives you the choice whether to receive telemarketing calls on your home and cell phone. You can register up to three numbers for this free service. You can register to remove your phone number(s) by calling toll free 1-888-382-1222, or via the Internet at http://www.donotcall.gov. If you call, you must call from the phone you intend to register.

If you register your phone number(s) most unwanted phone calls will stop within 31 days or less, but not all. The laws still permit these kinds of calls: from or on behalf of political organizations, charities, telephone surveys, any business with which you already have an existing business relationship (this includes any business from which you make a purchase).

If you receive a call you believe violates the Do Not Call Registry you can file a complaint by calling the number above or visiting the web site. In order to file a complaint you need either the name or phone number of the company that called you, the date of the call, and your registered phone number.

---

**Stoma Cover Tip**

If you wear the kind of stoma cover which closes with Velcro, be sure to attach the two ends securely before washing. This will greatly increase the life of the hooked half of the Velcro.
The Dating Dance...
by Debi Austin

We have made miraculous discoveries and advancements over the years. We have men/women living in unnamed parts of the solar system, we have made the desert bloom, and we have altered the human life span into triple digits. Yet we still deal with the common cold, acne, and the fear of dating. Not necessarily in that order.

I grew up in the 50’s. My grandmother believed women only went to college to find a husband. Bless her. This is also the same woman that told me, “Mark my words, young lady. Your first child will be just like you!” I have no children of my own; she could have been telling the truth.

In those days people laid heavy trips on their kids; some still do. Women were encouraged to marry young and produce children. After all, mothers wanted to be grandmothers. It was almost demanded of young men to choose a craft or profession in their early teens. Strange choices considering very few knew what the world had to offer them. Pick a husband/wife, choose a job, buy a house, and ask no questions. Simple, or not exactly.

What if...you wanted to see the world, dance in the streets, see life from a different angle, or simply be free to choose your own way. Following in any footsteps can be a rough road. New rules of dating were required for this. For those of us that did not want a husband/wife, honesty was mistaken for irresponsibility. Not wanting children was a sign of deep family secrets or in some cultures--punishment.

Dating was/is a test. How honest are you required to be? What little idiosyncrasies do you hide? Do you eat with your fingers? Do you tell him/her that you want to watch a hockey game instead of some love story? Do you ever tell him/her that you have dreams and adventures to follow? Do you really say you do not want children? When does it get easier? Never. Dive in! All the fears of your teens still exist, you are just older.

Those things seem kind of a moot point when you are dealing with a hole in your throat, a funny voice, and a flippant sense of humor on many levels. No matter what we say or think, there is no way this surgery did not effect the way we see life and the world in general. Some things that would have twisted our senses a year before surgery are now one more thing to add to the pile, the donut pile-when you get “around-to-it.”

I think after surgery we confuse what we want with what people think we need. Some want to take care of us. That is a wonderful gift to be appreciated for what it is, a gift not a way of life. As much as I hate to say this, we are treated how we allow people to treat us. If we see a broken person in the mirror, so will everyone else. Not what we wanted, maybe not fair, and not right, but true. Want to test it, go to a mall and sit on a bench and watch people for an hour. It will surprise you. “Be all you can be” does not just apply to the Army by any means!

If necessity is the mother of invention perhaps we should mark our calendars every so often to evaluate ourselves. It becomes necessary to reinvent who we are, what we are, and most importantly what we want/need on a regular basis. Some of the other distractions are gone. Most of us do not have to do the children thing. We have our skills even if some alteration is required, and we know where we live. These things should make this little dance easier, right? You just keep thinking like that all the way to the single empty seat at the counter of the coffee shop. Now it is harder than it was the first time if you can imagine. Now we are older, set in our ways, unwilling to settle, and at the same time want to share these carved in stone ways with someone else. We do not want much here, do we?

Many of us have not done the dating dance in so long we have no idea where to even start. People are shocked or surprised by our voice, and we become defensive. The more defensive we become, the more our voices change, usually for the worse. Then frustration sets in, and the next thing many of us are home sitting on the pity pot with a bottle of wine or a bottle of whiskey. And we ask, “What went wrong?” We expected to be taken at face value; and when we were, that is not what we wanted.

We want the world to see the person we were instead of offering the world the opportunity to see who we are. No one can date a memory especially when it is not their memory. We have to discover the new person from the voice of offering the world the opportunity to see who we are. These things should make this little dance easier, right? You just keep thinking like that all the way to the single empty seat at the counter of the coffee shop. Now it is harder than it was the first time if you can imagine. Now we are older, set in our ways, unwilling to settle, and at the same time want to share these carved in stone ways with someone else. We do not want much here, do we?

Many of us have not done the dating dance in so long we have no idea where to even start. People are shocked or surprised by our voice, and we become defensive. The more defensive we become, the more our voices change, usually for the worse. Then frustration sets in, and the next thing many of us are home sitting on the pity pot with a bottle of wine or a bottle of whiskey. And we ask, “What went wrong?” We expected to be taken at face value; and when we were, that is not what we wanted.

We want the world to see the person we were instead of offering the world the opportunity to see who we are. No one can date a memory especially when it is not their memory. We have to discover the new person from the voice of offering the world the opportunity to see who we are. These things should make this little dance easier, right? You just keep thinking like that all the way to the single empty seat at the counter of the coffee shop. Now it is harder than it was the first time if you can imagine. Now we are older, set in our ways, unwilling to settle, and at the same time want to share these carved in stone ways with someone else. We do not want much here, do we?

Many of us have not done the dating dance in so long we have no idea where to even start. People are shocked or surprised by our voice, and we become defensive. The more defensive we become, the more our voices change, usually for the worse. Then frustration sets in, and the next thing many of us are home sitting on the pity pot with a bottle of wine or a bottle of whiskey. And we ask, “What went wrong?” We expected to be taken at face value; and when we were, that is not what we wanted.

We want the world to see the person we were instead of offering the world the opportunity to see who we are. No one can date a memory especially when it is not their memory. We have to discover the new person from the voice of offering the world the opportunity to see who we are. These things should make this little dance easier, right? You just keep thinking like that all the way to the single empty seat at the counter of the coffee shop. Now it is harder than it was the first time if you can imagine. Now we are older, set in our ways, unwilling to settle, and at the same time want to share these carved in stone ways with someone else. We do not want much here, do we?
dreams. You worked at it. Very few people meet someone and say, “I just met my husband/wife” and the dream begins. It is hard work. Maybe because we are discovering ourselves through someone else’s eyes and the view is different, shocking, or disturbing, we stumble and lay blame.

We need to relax. Have a plan that can withstand some altering from time to time. But most important we have to understand who we are because this is the person we want to share with someone else. Our private selves have to be dealt with. I met a really nice laryngectomy who told me he was so ashamed because he had done this to himself and how could anyone look at him and not see that? Wow, how heavy a trip is that? I think the first step to healing in many cases is to forgive yourself of the flaws you perceive.

In the first few years after surgery we are getting used to who we are, what we are, where we’re at, and where we want to go. This is a difficult adventure to share. Every day is new. I think it takes more honesty than some of us want to admit to at first. But there is still a need for companionship and sharing. How do we do this? Join a church, enroll in a class, teach kids to play chess, get out there! The more comfortable you are out in the world, the more comfortable the world is with you. It really is a “Catch 22” situation. Dating is all about sharing, but healing is very personal. You have to separate the two and at the same time make them work together.

If you are not comfortable with the new you, how can someone else be comfortable with you “You have to get your act together to take it on the road!” (1992)

Sapp Funderburk in YouTube video

Those with Internet access should check out IAL Treasurer Sapp Funderburk’s video on YouTube. It is quite professional looking and features Sapp’s great TEP voice. View it here: http://www.youtube.com/watch?v=wPUGVl8tjnA&featu=re=related

Humidifier Filters

If you use the kind of portable humidifier which contains a replacement filter, be sure to replace it on the schedule recommended by the manufacturer. Several types of humidifiers can distribute bacteria, viruses, minerals dissolved in the water, molds, etc., along with the water vapor and make us sick with a disease called “Humidifier Fever.”

According to the experts, in addition to replacing filters one of the most neglected things users should be doing is to thoroughly clean out the humidifiers following manufacturers directions on how and how often to do it.

Gifts to Honor Both the Living and Those Who have Left Us

The IAL Board of Directors invites you to make a gift in memory of someone who is no longer with us, or in tribute to someone you wish to honor. Gifts in any amount are welcome. In lieu of flowers, you may wish to donate in memory of a loved one, friend, club member, or others.

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

Each donation will be privately acknowledged and also posted on the IAL web site. Gifts will also be periodically acknowledged in the IAL News by donor (unless you wish to remain anonymous), amount of the gift, and the name or names of those who are being honored.

The Board of Directors believes that this program will help the IAL continue to serve the purposes for which it was created more than 50 years ago, and also provide us with a way to publicly honor those deserving of recognition.

Selective Neck Dissection

A common surgical procedure for dealing with head and neck cancer which has spread to lymph nodes is to remove all of the nodes in the neck and shoulder area (called a “radical” or “modified radical neck dissection.”)

Research presented at the American Academy of Otolaryngology - Head and Neck Surgery 2008 Meeting looked at the outcomes for patients who were given different kinds of neck dissections. The researchers compared patients who had radical and modified radical dissections with those who had “selective dissection” which only removes lymph nodes which were shown to contain cancer cells.

Even when corrected for the stage of the tumor and other factors, cancer recurrences in lymph nodes occurred less frequently in those who had the selective neck dissections compared to the other two types. There were no significant differences in the overall standard survival rate of five years for patients treated by any of the methods.

Since the radical neck dissection can create major rehabilitation challenges for laryngectomees this research may begin the process of changing a standard medical practice which favored the radical or modified radical neck dissection, and encourage surgeons to use methods which minimize the kinds of side effects which can result from the more extreme neck dissection procedures.
IAL ANNUAL MEETING REGISTRATION
San Mateo, California
June 25-27, 2009

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) using the form on page 19.
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) using the form on page 19.
If you are a spouse, caregiver or a laryngectomee not looking for speech assistance as a VIP or becoming a Laryngectomee Trainee, fill out the form below.

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

Registration Fee: $65.00 per person (If mailed on or before June 1, 2009)
$75.00 per person (If mailed after June 1, 2009)

(Please Print)
First Attendee ________________________________________________  Laryngectomee?  □ Yes  □ No
Second Attendee ________________________________________________  Laryngectomee?  □ Yes  □ No
Street Address ___________________________________________________________________________________
City _________________________________State/Province_________ ZIP _______ Country ________________
Phone Number (_____)_________________________  E-Mail _____________________________________________
□  Check here if you do not want to have your address, phone, or e-mail included on the attendee list.
□  Check here if you require assistance or special accommodations to attend the meeting because of physical limitations. You will be contacted for further information. (Note: All sessions of the Annual Meeting and Voice Institute are conducted in English, and if needed, you must arrange for your own translator).

Mail check or money order payable in U.S. dollars to: IAL 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

Cardholder Name_____________________________________  Card Number _______________________________
Expiration Date ______________  Cardholder Signature _________________________________________________

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

San Mateo (San Francisco Airport) Marriott*
1770 South Amplett Boulevard, San Mateo, CA 94402-2902
Phone: 1-800-556-8972
Fax: (650) 653-6080

Group discount rate is $109/night (1 or 2 people). This discounted rate will run from June 22 through June 29. Be sure to mention that you are with the 2009 IAL to get this discounted rate.
*There is also a San Francisco Airport Marriott, but it is in Burlingame, C.A.

You may also register on line at http://www.TheIAL.com/SanMateo
IAL VOICE INSTITUTE REGISTRATION
San Mateo, California
June 24-27, 2009

If you are a laryngectomee and would like assistance to develop or improve your speech, register for the IAL Voice Institute as a Voice Institute Pupil (VIP) on the other form below.

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 laryngectomies, register to the IAL Voice Institute as a Laryngectomee Trainee (LT) on the form below.

All others please complete this form to register for the Annual Meeting on page 18.

Registration Fees check one): On or before June 1, 2009 After June 1, 2009

Voice Institute Pupil (VIP) $80 (limited scholarships available) $95
Laryngectomized Trainee (LT) $80 (limited scholarships available) $95
Speech Pathology Trainee (ST) $400 $425
Graduate Student (GS) $150 $165

(Please Print)

First Attendee _______________________________ Laryngectomee? ☐ Yes ☐ No
Second Attendee _______________________________ Laryngectomee? ☐ Yes ☐ No

Street Address ___________________________________________________________________________________

City _________________________________ State/Province_________ ZIP _______ Country ________________

Phone Number (_____)_________________________ E-Mail ____________________________________________

☐ Check here if you do not want to have your address, phone, or e-mail included on the attendee list.

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

Mail check or money order payable in U.S. dollars to: IAL 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

Cardholder Name_____________________________________ Card Number _______________________________

Expiration Date __________________ Cardholder Signature _________________________________________________

Please register for the IAL Annual Meeting OR the IAL Voice Institute.

Do NOT register for both events. ALSO REGISTER FOR THE HOTEL USING THE INFORMATION ON PAGE 18.

There are a limited number of Batten Scholarships available for laryngectomies who require financial assistance to attend. To apply for eligibility please visit http://www.TheIAL.com/San Mateo or contact
Jeff Searl, PhD., CCC-SLP
The University of Kansas Medical Center
Hearing and Speech Department
391 Rainbow Blvd MS3039
Kansas City KS 66160
jsearl@kumc.edu

You may also register on line at http://www.TheIAL.com/SanMateo

19
Convert a T-Shirt to a Stoma Cover

For those with some sewing skills, converting an old favorite t-shirt (or even a new one) into a stoma cover is not particularly difficult.

Begin by cutting the collar downwards all the way down the back of the shirt and through the bottom hem. At about 3 inches down from the collar ends, cut the fabric at right angles for a length of about five inches, and again at right angles down the front of the shirt through the bottom hem. Cut the remaining material off at about 6 1/2 inches below the front of the collar at right angles to the vertical cuts.

Fold the cut collar ends over about an inch with the edges on the inside of the shirt. Use a zigzag stitch to sew along the cut edges. Sew a 2 inch strip of Velcro, hooks side up, on the outside of the collar end; and a 2 inch strip of the loops part of the Velcro on the inside of the other collar end. (You want the hooks side on the outside so it does not irritate the skin.) Finish by sewing the edges of the stoma collar to keep it from fraying.

Anyone who has done laundry before and cleaned out the drier lint filter can attest that cotton and other fabrics shed fibers. With this in mind, it would be best to wear your homemade cotton stoma cover on top of a foam filter (or HME) to keep fibers out of your stoma. Also, since cotton t-shirts are fairly thin you should consider the suggestions for lining one below.

You can put a partial lining on the reverse side of the cover. For this you should use a porous fabric which does not shed much, if any, such as chaf- fon-type synthetic fabrics; or the kind of fabric used in bathing suit linings or lingerie. Just cut a 4 or 5 inch piece of this material (double this size and fold it over for additional protection), hem it all around, and sew it to the top on the inside of the cover at the collar hem so that it will be centered over the stoma when worn. It only needs to be sewn at the top edge (which will keep it from bunching up because of shrinkage.

The pattern graphic to the left is not drawn to scale. This pattern shown can also be used to make a stoma cover from scratch. You may also have a favorite stoma cover which you can use as a pattern for making your own.

(A version of this article appeared in the November 2000 issue of the WebWhispers Journal. Thanks to Patty Jones for contributing some of the sewing directions and Pat Sanders.)

Tip for Attaching Handsfree Valve

A major challenge for those who use the handsfree valve is to keep a seal. Steve Staton of Suncity, California shares his methods for attaching a handsfree valve with anyone who is interested. You can see and hear Steve explain and demonstrate his method, along with hearing his very good TEP voice, at this web address:

http://www.youtube.com/watch?v=5Wolz5_n1j8

Please support our advertisers • They support the IAL and help keep The IAL News coming to you.
If you would like to enjoy the convenience of automatic billing for your donations to the IAL, simply complete the information below and sign the form. All requested information is required. Once received, we will automatically bill your credit card for the amount you specify and the charges will appear on your monthly statement. You may cancel at any time by contacting us.

**Donor Name ______________________________________ Phone __________________________**

**PAYMENT INFORMATION**
I authorize the International Association of Laryngectomees to automatically bill the card listed below as specified:

Amount _____________ Frequency (check one) Monthly _____ Quarterly _____ Yearly _____

Start billing on (date) _____________________ End billing on (date)____________________________

Unless prior arrangements are made, all donations will go to the general fund.

**CREDIT CARD INFORMATION:**

The International Association accepts the following credit cards (check one):

Visa ____  MasterCard ____  American Express ____  Discover ____

Name on credit card ________________________________________________________________

ZIP code (from billing address)______________ Exp. date __________________

Credit card number __________________________________ Date ___________________

Signature ___________________________________________________ Date ___________________

Mail completed form to:
IAL 925B Peachtree Street NE • Suite 316 • Atlanta GA 30309
HAS YOUR ADDRESS CHANGED?

Let us know if we need to update your mailing address to ensure that you are receiving your IAL News! Be sure to give us your old mailing address so we can delete it from our list.

www.TheIal.com

Visit us online

Fill out and mail in the form on the back page of this issue.

Don’t miss an issue!

Available from the IAL

VIDEO/DVD LIBRARY

The First Thirty Days—(1/2” Video or DVD) Laryngectomees discuss their experiences after surgery. A $15 donation is requested.

Move It or Lose It!—(1/2” Video or DVD) Exercises designed to alleviate muscle stiffness and range of motion problems for anyone who has had surgery in the neck and shoulder area. A $15 donation is requested.

It’s Not a Walk in the Park—(1/2” Video or DVD, 16 min.) An anti-tobacco message aimed at teens and preteens. A $15 donation is requested.

Spanish Videos & DVDs
A Una Sola Voz—(1/2” Video or DVD, 35 min.) A $10 donation is requested.

Rehabilitacion de la Voz—(1/2” Video or DVD, 35 min.)

PUBLICATIONS

The IAL currently publishes and distributes the following:

IAL Brochure*
Information about the IAL. FREE!

The IAL News
A newsletter that is published four times annually.
A $5 a year donation is requested but not necessary.

Building A Successful Laryngectomee Club
Information on how to start a club or make your club successful. FREE!

Rescue Breathing for Laryngectomees and other Neck Breathees
Available in English and Spanish. FREE!!

The above can be obtained from:
IAL
925B Peachtree Street NE
Suite 316
Atlanta GA 30309-3918

FREE Pocket Emergency Cards
Emergency cards are available in English and Spanish. (Send stamped, self-addressed envelope and specify language.)

FREE Emergency Window Stickers
These emergency stickers can be used on automobiles or on home windows. They are available in English and Spanish. (Send stamped, self-addressed envelope and specify language.)

Videos and DVDs can be obtained from:
IAL
925B Peachtree Street NE
Suite 316
Atlanta GA 30309-3918
INTERNATIONAL ASSOCIATION OF LARYNGECTOMEES

OFFICERS

Tina Long—President
Tlong2051@charter.net

Bob Herbst—Vice President
bobh@i2s.com

Terrie Linn Hall—Secretary
tlh_tfsnc2002@yahoo.com

Sapp Funderburk—Treasurer
csfund@bellsouth.net

EXECUTIVE DIRECTOR

Susan Reeves, SLP—Executive Director
ialhq@TheIAL.com

IAL VOICE INSTITUTE

Jeff Searl, Ph.D—Director
jsearl@kumc

IAL NEWSLETTER

David Blevins—Editor, Graphics, Production
david6511@aol.com
3558 Shore Drive #601
Virginia Beach, VA 23455-1714

IAL BOARD OF DIRECTORS

Kay Allison
whisperingkay@yahoo.com

David Blevins
david6511@aol.com

Tom Cleveland
tcv2137@sbcglobal.net

Philip Doyle, Ph.D
pdoyle@uwo.ca

Tom Herring
tomherring@embarqmail.com

Joe Marasco
smokelessjoe77@cox.net

Sheldon Schultz
schultz_sheldon@yahoo.com

IAL WEBSITE

Ron LeClair—Webmaster
www.TheIAL.com
Use the forms below to make a voluntary tax-deductible donation; or subscribe, change your address, or remove a name from the mailing list.

To: IAL
925B Peachtree Street NE
Suite 316
Atlanta GA 30309-3918

Enclosed is my tax deductible gift of $10 or more, with my check or money order made out to IAL News.

Name __________________________________________________
Address ________________________________________________
City, State, Country ________________________________________
ZIP/Postal Code __________________________________________

Thank you for helping to share hope!

To: IAL
925B Peachtree Street NE
Suite 316
Atlanta GA 30309-3918

Please add my name to IAL News mailing list
Please remove my name from the IAL News mailing list.
Please change my address as indicated below.
I am a Laryngectomee Speech-language pathologist
physician Nurse Other _________________________

Name __________________________________________________
Address ________________________________________________
City, State, Country ________________________________________
ZIP/Postal Code __________________________________________