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The mission of the Association of Hearing Instrument Practitioners of Ontario is to represent and guide its members in their practice which include, the testing, selecting and fitting, and dispensing hearing instruments and associated devices in the best interest of the hard of hearing, and may include the removal of cerumen from the external ear canal. Membership is available to hearing instrument practitioners or to those who have an interest in the hearing instrument profession.

Signal is the official journal of AHIP, the professional association of Hearing Instrument Practitioners of Ontario, incorporated in 1988 for the purpose of ensuring quality care for the hard of hearing. *Signal* presents technical and trade information to assist hearing instrument practitioners to better serve the hard of hearing.

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Happy spring AHIP members! And, with spring comes our annual AHIP Symposium. Maggie and her team are hard at work putting together another unforgettable event. Make sure to follow us on Facebook (AHIPOntario) and Instagram (AHIPOntario) for news, updates, pictures, and the countdown to Symposium! I also encourage those that do have Instagram, to use the #AHIP2018 hashtag to share your pictures. This year we have more great speakers, fun events, and an amazing Gala to be headlined by Canadian platinum recording artists, Glass Tiger!

Aside from the 2018 Symposium, this issue of the *Signal* features some great content. We have an article on how rechargeable batteries have really come on strong and how well they work with hearing aids. Two separate health features; the first on the link between hearing loss and migraines, and the second about poor nutrition in early childhood leading to hearing loss. Finally, John Niekraszewicz checks in with his financial column. This issue is on planning your exit strategy.

Can't wait to see you all in May for the Symposium and don't forget to register before the early bird deadline on April 16th!

Chris Arnold
Editor-in-Chief



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Dear Members:

Welcome to the Symposium Edition of the *Signal*! A special thanks to Maggie Arzani, Chair of Symposium and all who are working so hard to organize such an amazing schedule of events. A registration form is included in this edition of the *Signal*. Maggie would like to remind everyone to register for Symposium by **April 16, 2018 to take advantage of the early bird rate.**

As I near the end of my term as AHIP President, I would like to thank the Executive, Board of Directors whom I have relied and depended on throughout. I would also like to thank you for all your support and confidence as we remain vigilant in our commitment to provide high quality, accessible healthcare to the Hard of Hearing of Ontario.

Please plan to attend Symposium and the Annual General Meeting and be an active participant in the future of your profession.

I look forward to seeing you soon!

Respectfully Submitted,

Vivienne Saba-Gesa
AHIP President



Dear AHIP Members:

AHIP Symposium means spring and I am very much looking forward to both.

By now, you will have received your Notice of Annual General Meeting which will take place on Friday, May 11, 2018. It is important to remember that the AGM is intended for all AHIP members in good standing whether you register for Symposium or not. Please plan to attend. All association business in relation to membership, education, quality assurance, professional practice, public relations and professional relations and treasury will be discussed and elections conducted. In addition, there will be updates on specific projects

currently being worked on including the Workplace Safety & Insurance Board (WSIB) and others.

I would like to take this opportunity to extend my personal and sincere appreciation to Vivienne Saba-Gesa who at the AGM will be concluding her term as AHIP President. Her leadership and personal dedication to the enhancement and safekeeping of this profession, in the best interest of the hard of hearing, is amazing!

Respectfully Submitted.

Joanne Sproule
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Financial Planning is Critical for Business Exit Success

By John Niekraszewicz



The following is excerpted from “What You Ought to Know before planning Your Business Succession” by author and financial advisor John Niekraszewicz.

As you probably know, Business Succession occurs when the ownership of a business is passed from one set of hands to another. This could mean a) the outright sale of a business to a third party, b) the passing on of the business from one generation to the next, or c) the complete liquidation of the business.

Business Succession Planning is an essential part of a smooth transition. Planning early is the key to making everything work out the way you want it to when the time comes for you to pass your business to someone else.

We sometimes hear of a lucky person whose business exit went quickly. Usually that was because it went according to a plan put in place a few years before, when the idea of exiting the business first arose.

Although statistics vary, the vast majority of family-run businesses end up lasting one generation. Consequently, many Canadian business owners will face a crisis at retirement when there is no family member willing or able to take over - and no company insider who can afford to buy the company. Let's look at Bob Sr. as an example.

For most of his life, Bob Sr. was obsessed with paying too much in taxes, or any taxes. He never believed in putting money away into RRSP's (Registered Retirement



Savings Plans) because in his words, “RRSP’s are just another way for the government to get more taxes out of us. When you take your own money out of RRSP’s, the taxes you have to pay are huge.”

Bob Sr. did have a successful business, but the bulk of his net worth was tied up in the business. He didn’t follow his financial advisors’ advice over the years and now that retirement was looming he could see the benefits that financial planning provided, which include RRSP’s and other mainstream liquid investments. Luckily, he had Bob Jr. who was an ideal candidate for helping him transition into retirement with a steady income stream.

After Bob Jr. received a HIS Diploma, he was given a lot of business responsibilities. He was involved with client evaluations, fitting, dispensing and follow-up care as well as dealing with suppliers and financial advisors. Involving Bob Jr. with the financial aspects of the business early on was important. Bob Sr. did not want Jr. to follow in his path of financial illiteracy, but rather be surrounded by a team of trusted advisors who were able to secure his financial well being.

The team of advisors consisted of a lawyer, accountant and financial planner. They showed Jr. how to advance

his retirement plan and creditor proof the business. They also were able to rearrange his banking so that Jr. now earned thousands of dollars more interest on cash balances in both his personal and business bank accounts.

Bob Sr. was now ready to get on with the next stage of his life and enjoy travelling the world with his wife. He had confidence in Jr. and his ability to have the business fund a buyout plan over multiple years without placing stress on the business’s operations and capital needs. Since Bob Sr. was dependent on the continued financial success of the business, it was crucial for the team of financial advisors to show Sr. how to protect his retirement income and simplify his estate using a variety of techniques.

After a few years, a recession hit and business suffered. Bob Sr. remembers a similar period during his business life in the 1991-1992 recession that caused him a lot of pain and financial stress. He had trouble borrowing money from the bank, his real estate investments dropped in value and the financial losses he suffered affected his health.

Now Jr. was facing a similar economic situation - business recession and asset prices falling. But, Jr.

was financially secure because he followed his financial advisors advice. Bob Sr. was getting his monthly retirement income from Jr. like clockwork.

One day Sr. overheard Jr. arranging a meeting with some bankers and he started to get worried. He approached Jr. and said, “ Oh no, don’t tell me you have to borrow money from the bank to keep the business afloat.” Jr. smiled, “Don’t worry Dad, business is great. It is our competitors who are in bad shape and I am taking advantage of this opportunity to expand our business by acquiring one of them at a rock bottom price.” So with a grin, Bob Sr. said, “That’s my boy”.

Business Succession Planning requires mapping out a strategy – something that may take a number of years. You have to realize you won’t be around forever

and that at some point someone else will take over your business. After all, no one is immortal. The last thing you want is for you or your family to be forced into selling the business.

Before implementing any tax, investment, life insurance, or estate planning solutions it is best to seek professional advice. Have an experienced team of professionals work together to uncover the weak links in your plans and implement the correct solutions. Don’t just leave your plans to chance because without structuring your family’s wealth and estate plans properly, often, bad outcomes occur.

Secure the dog house and invest wisely, then you can enjoy life & have fun.

John Niekraszewicz



About the Author

John Niekraszewicz (Nick-ra-shev-itch) BMath, FCSI, CFP, FMA is the Certified Financial Planner responsible for the AHIP Association Health & Dental Plan provided by JVK Life & Wealth Insurance Group. John is also the Principal of JVK Life & Wealth Advisory Group, specializing in Wealth & Estate Planning. John welcomes your questions and can be reached at 1-800-767-5933 or info@jvkgroup.com

Best of All Time: Rechargeable Batteries and Hearing Aids Are A Natural Fit

By Gabrielle Filips, AuD

By Gabrielle Filips, AuD, originally published 12/25/2012

Reprinted with permission from <http://hearinghealthmatters.org/hearingviews/2012/rechargeable-batteries-and-hearing-aids-are-a-natural-fit/>

As professionals in the hearing health industry, our main goal is to ensure the best hearing experience possible for hearing aid wearers. That experience goes beyond the way wearers hear in their surroundings, and extends to how they handle and manage their hearing aids and hearing aid batteries. Currently, the percentage of hearing aid wearers who are discontent with battery functionality is alarming. In the 2010 MarkeTrak VIII survey, 45% of participants rated their hearing aid's battery life as less than satisfactory.¹

How do we resolve this concern? Fortunately, advancements in rechargeable battery technology are providing a powerful, user-friendly, and convenient alternative for powering today's hearing devices.

Although rechargeable batteries aren't new to the hearing aid scene, their success has been limited until recently. First introduced 30 years ago, rechargeable batteries weren't initially widely adopted, as they were difficult to operate, cumbersome, and were perceived as less reliable than the zinc-air alternative. However, thanks to improvements in NiMH battery design, today's rechargeable batteries offer improved power and smaller sizes to meet current cosmetic demands.

Rechargeable Hearing Aids Meet User's Unique Needs

Rechargeable batteries have become a mainstay for consumers. They use them in a myriad of portable devices, including mobile phones, cameras, and DVD players. Increasing awareness of the benefits associated with rechargeable batteries has spurred their adoption in many applications, including hearing aids

The benefits of rechargeable batteries for hearing aids include:

- Enhanced comfort and ease of use:** Since the average age of hearing instrument wearers is 71 years,¹ hearing aids need to be designed to accommodate the particular needs commonly found in that age group. Among these age-related complications are decreased dexterity and diseases that numb the fingertips, such as arthritis, diabetic neuropathy, and Parkinson's disease. Such ailments can make opening battery packaging, accessing the battery compartment, and guiding the battery into place a very frustrating and even painful experience. For patients with such physical limitations, rechargeable batteries are an ideal solution, as they don't need to deal with tiny batteries on a regular basis. Rechargeable hearing aids are simply placed into a charger at night, and in the morning they are ready for the day's use.
- Eco-Friendly:** Rechargeable batteries give hearing aid users a "greener" alternative to disposable batteries, which expose the environment to significant amounts of lead and acid. During a three-year time span, two digital hearing aids can use an average of more than 300 disposable hearing aid batteries. By contrast, within the same time span, two comparable hearing aids will use an average of only six rechargeable batteries.
- Cost-Efficient:** Although the upfront cost of rechargeable batteries is greater than that of disposable batteries, over time, disposable batteries are likely to cost more than a rechargeable option. For example, a single zinc-air battery costs an average of \$1. Assuming the typical binaural wearer

changes the batteries once a week, costs may exceed \$300 for a three-year period. A three-year supply of rechargeable batteries and one charging station costs less than \$200

- **Confidence:** Hearing aid wearers often worry that their battery will die at an inconvenient time. Rechargeable batteries eliminate this cause for concern, as the power source is charged during the night and will last throughout the next day. Another advantage of rechargeable hearing aid batteries is that wearers don't need to remember to purchase new ones or to remember where they put replacement batteries when they are needed.
- **Flexibility:** Today's rechargeable hearing aids allow users to use both zinc-air and rechargeable batteries. This gives them the flexibility they need in circumstances when a disposable battery option is essential.
- **Longevity:** Zinc-air batteries can drain prematurely, if not properly sealed. On the other hand, rechargeable batteries are self-contained, sealed systems, which prolongs their shelf life and reliability. In addition, rechargeable batteries have been proven to better withstand severe conditions and climates.

Hearing Aid Charging Stations Have Improved

Today's battery charging stations are designed to make the recharging process easy for hearing aid users. For example, they can offer the dual functionality of recharging the hearing aids while dehumidifying them with an electronic drying function, thereby helping prolong the life of the hearing aids. The instruments can simply be placed inside the charging cavities of the charging unit. The battery doors don't need to be

opened, nor do the batteries need to be removed. When a person places hearing aids inside the charging station, the base automatically detects the instruments. Once the hearing aids are detected, the charger turns them off automatically, eliminating any risk of feedback and ensuring an optimal charging process.

Chargers for reusable batteries can have modular designs that include an outer case and an insert. The insert differs based on the battery size, which allows professionals to stock a base and a few inserts to accommodate any instrument they may be fitting.

Rechargeable Batteries for Hearing Aid Meet Consumer Demands

As hearing aids continue to evolve and perform more power-hungry functions, further technological development will be needed so that rechargeable batteries can offer more power in smaller designs. Conversely, hearing aid manufacturers need to be cognizant of developing products and accessories that consume less power and thereby increase battery life and reduce charging time.

The efficiency, usability, and power of a hearing aid battery can greatly affect an individual's hearing experience. As hearing care providers learn more about the benefits of rechargeable batteries, more hearing aid users will be able to improve not only their hearing, but their lifestyle as well.

References

1. Kochkin S: MarkeTrak VIII: The Key Influencing Factors in Hearing Aid Purchase Intent. *Hear Rev* 2012;19(3):12-25.

Gabrielle Filips



About the Author

Gabrielle Filips, AuD, is an Educational Specialist with Siemens Hearing Instruments. Dr. Filips joined Siemens in 2008 following 12 years in private practice. Her responsibilities include the training and education of staff and professionals on Siemens technology, services, and software. She is a member of the American Speech-Language-Hearing Association and the American Academy of Audiology.



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The Link between Migraines and Hearing Loss

By **Debbie Clason**

Contributed by Debbie Clason, staff writer, HealthyHearing January 30, 2018. Reprinted from <https://www.healthyhearing.com/report/52832-The-link-between-migraines-and-hearing-loss>.

Having an annual hearing evaluation is a good idea no matter how well you are hearing, but if you suffer from migraine headaches it may be even smarter

to keep close tabs on your hearing health. Studies show that those who suffer from migraine headaches have an increased risk of developing hearing loss than those who do not. Other studies indicate migraine sufferers are also twice as likely to suffer from sudden sensorineural hearing loss (SSHL).



Migraines and hearing health may be connected for some.

What Are Migraines?

According to Migraine.com more than 37 million Americans suffer from migraine, a neurological disease characterized by episodes known as migraine attacks. A migraineur's brain is biochemically different than the brain of a person without this disease, which can be genetic and typically affects more women than men. Although migraine attacks are known as primary headaches, their symptoms differ from regular headaches. The most common symptoms are:

- Nausea
- Pain on one side
- Vision changes
- Aura (seeing bright spots, flashes or zigzag lines)
- Vomiting

Migraines can last anywhere from 4 hours to several days. Symptoms and triggers vary according to the individual.

Migraines and Hearing Loss

So what does a neurological disease have to do with your hearing? Plenty, according to a study by

researchers in Egypt's Assiut University Hospital's Department of Neurology and Psychology. Their findings were published in the July-August 2012 issue of the American Journal of Otolaryngology.

Using electrophysiological testing, they looked at the function of the cochlea and auditory pathways of migraineurs compared to those who did not have the disease and discovered that two-thirds of the migraineurs had one or more abnormalities. Testing included the otoacoustic emissions test (OAE), which measures the echo produced by the vibrations of hair cells in the cochlea when it's stimulated, and the auditory brainstem response (ABR) test, which measures the brain's response to sound. The researchers hypothesize these abnormalities could be a result of compromised blood supply to the auditory system due to the migraine attacks.

This is significant because the sensory hair cells in the cochlea depend on healthy circulation to function properly. A decrease in circulation could eventually cause these hair cells to become damaged or die, causing sensorineural hearing loss.

Migraines and Sudden Sensorineural Hearing Loss

Additionally, a study by researchers from Taipei Veterans General Hospital in Taiwan found that migraineurs are nearly twice as likely to develop a rare condition known as sudden sensorineural hearing loss (SSHL).

Individuals affected by this condition typically experience an unexplained, rapid loss of hearing in one or both ears, which may occur immediately or over the course of several days.

Sudden Hearing Loss Is Considered A Medical Emergency and Requires Immediate Care

According to the National Institute on Deafness and Other Communication Disorders (NIDCD), experts estimate SSHL only affects one in 5,000 each year. Typically, these are adults between the ages of 40-50; a cause for the condition is identifiable in only 10-15 percent of the reported cases.

Treatment

Treatment plans for migraines vary according to the individual as well as the severity and frequency of pain. Experts recommend you keep a journal of your migraines and all of your symptoms so your migraine specialist can make an appropriate diagnosis.

In the event you experience sudden loss of hearing, seek help immediately at an emergency medical facility. If you are diagnosed with migraine disease, make sure your treatment plan includes an annual hearing test with a hearing healthcare professional who is aware of your condition and can monitor your hearing health accordingly. Visit our directory for clinics near you.

Debbie Clason



About the Author

Debbie Clason holds a master's degree from Indiana University. Her impressive client list includes financial institutions, real estate developers, physicians, pharmacists and nonprofit organizations.

Hearing Loss Linked to Poor Nutrition in Early Childhood, Study Finds Both Acute and Chronic Forms of Undernutrition in the Preschool Years are Associated with Hearing Impairment Later in Life



Johns Hopkins Bloomberg School of Public Health

Young adults who were undernourished as preschool children were approximately twice as likely to suffer from hearing loss as their better-nourished peers, a new study suggests. The study, led by researchers at the Johns Hopkins Bloomberg School of Public Health, analyzed the relationship between the hearing of more than 2,200 young adults in Nepal and their nutritional levels as children 16 years earlier. The findings suggest that nutritional interventions in South Asia could help

prevent hearing loss, a condition which currently affects an estimated 116 million young people in the region.

The study was published February 7 in the *American Journal of Clinical Nutrition*.

Hearing loss is the fourth leading cause of disability worldwide, and an estimated 80 percent of affected individuals live in low- and middle-income countries. Prevalence estimates of hearing impairment among children and young adults in South Asia range from 14 to 28 percent of the population.

“Our findings should help elevate hearing loss as a still-neglected public health burden, and one that nutrition interventions in early childhood might help prevent,” says Keith West Jr., a professor of International Health at the Bloomberg School and the principal investigator of the study. The lead author was Susan Emmett, MD, MPH, an otolaryngologist who conducted the analysis and wrote the paper as a postdoctoral fellow at the Bloomberg School’s Center for Human Nutrition.

From 2006 to 2008, researchers tested the hearing of more than 2,200 young adults. All study participants had been part of a nutrition trial conducted between 1989 and 1991 in the District of Sarlahi in Nepal that collected information to assess their nutritional status.

Results of the auditory tests show that young adults who were stunted in childhood were nearly twice as likely to show signs of hearing loss. Stunting, or being too short for one’s age, is a chronic condition of undernourishment that often starts before birth, which is a critical time for the development of auditory function. Researchers suspect that impeded inner ear development caused by undernutrition, especially in the womb, may contribute to the increased risk of hearing loss found in the study.

Participants who were too thin as children were also at a twofold increase of hearing loss. Being too thin for one’s age is typically caused by acute malnutrition, defined as shorter, more severe periods of undernutrition. Acute malnutrition raises children’s susceptibility to infections, including in the ear. Repeated ear infections can lead to hearing loss.

“Our findings are not only important for low-resource areas of Nepal, but also for much of South Asia,” says West. “The study site in Nepal is representative of much of the Gangetic region of South Asia. There are over 160 million undernourished children in this region, putting them at high risk for a range of health and developmental problems. We now have evidence that addressing this nutritional burden might also prevent hearing loss later in life.”

Previous studies have linked deficiencies of micronutrients, including vitamin A, to hearing impairment. This is believed to be the first, however, to investigate the relationship between generalized undernutrition and hearing loss, and it is believed to be the first to identify early childhood nutritional status as a modifiable risk factor for later-life hearing loss.

“Early childhood undernutrition increases risk of hearing loss in young adulthood in rural Nepal” was written by Susan D Emmett, Jane Schmitz, Sureswor L Karna, Subarna K Khatri, Lee Wu, Steven C LeClerq, Joseph Pillion, and Keith P West Jr.

The research was supported by the Bill & Melinda Gates Foundation (Grant OPPGH 614), the US Agency for International Development (Cooperative Agreement DAN 0045-A-5094), and the National Institutes of Health (5T32DC000027-25).

Source: <https://www.jhsph.edu/news/news-releases/2018/hearing-loss-linked-to-poor-nutrition-in-early-childhood-study-finds.html>

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(Without prior notice by the due date, NO dietary restrictions can be accommodated on site – no exceptions)

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Symposium Speakers 2018

Mark Peterson, H.I.S.



Mark was hired by Provincial Hearing Consultants in 2003 and graduated from George Brown College in 2006. He's been one of the top performers at Connect Hearing since Provincial Hearing was procured by them 7 years ago.

Mark is also a hearing aid user himself, and is actively involved with the Canadian Hard of Hearing Association (CHHA) – Hamilton Branch. He has written several articles in the CHHA Hamilton newsletter over the past 6 years, and was elected to their Board of Directors last year.

Mark also enjoys volunteering in his community; helping adults with disabilities and children expand their social skills through a weekly gaming group and painting club.

Wednesday, May 9, 2018 – Maximizing Your Potential, presented by Mark Peterson

Every client that walks into your clinic needs your help. Mark is going to show you ways to “wow” each and every one of them. He will give you tips and tricks to improve their experience and the success of your practice. By applying various easy-to-use methods, you too can improve your client satisfaction and become more successful clinicians.

Dr. Robert Sweetow



Dr. Robert Sweetow is Professor Emeritus and former Director of Audiology at the University of California, San Francisco. He received his Ph.D. from Northwestern University, M.A. from the University of Southern California and B.S. from the University of Iowa. Dr. Sweetow has written twenty-five textbook chapters and over 130 scientific articles. He is reviewer for several journals, author of Counseling for Hearing Aid Fittings and a former member of the Board of Directors of AAA. He was the co-developer of the LACE auditory training program. Dr. Sweetow has been an invited lecturer at more than 300 meetings worldwide, and is a highly sought-after speaker for his informative and entertaining style. His research interests include amplification, counseling, rehabilitation, neuroscience, and tinnitus. Dr. Sweetow was the recipient of the prestigious 2008 Distinguished Achievement Award from the American Academy of Audiology.

Wednesday, May 9, 2018 – The Impact of Cognition on Hearing Aid Use, presented by Dr. Robert Sweetow

Hearing aids are fit on patients of all ages, but the vast majority of users tend to be older people. Elderly hearing-impaired patients present unique needs with regard to amplification because peripheral hearing loss represents only a portion of the problem. For these individuals, the audiogram and simple word recognition testing in quiet yield only superficial information due to greater global involvement. In addition to hearing loss, communication efforts are confounded by problems influenced by cognitive deterioration, social factors, psychological issues, motivation, and visual and dexterity factors. In addition, many patients find themselves in noisy environments that conventional hearing aids have traditionally been unable to handle. In this session, cognitive declines will be analyzed with an emphasis on how these deficits can be detected by the hearing practitioner, how they are influenced by various hearing aid features, and what types of follow up rehabilitation may be appropriate.

Learning Outcomes

1. recognize the special needs presented by elderly patients;
2. be familiar with tests that can be included in the diagnostic battery that help identify global communication needs;
3. be able to formulate a comprehensive rehabilitation program extending beyond hearing aids;
4. integrate the patient's social support structure into a rehabilitation plan.

Ted Venema, PhD, Audiologist

*Ted Venema earned a BA in Philosophy at Calvin College (1977), an MA in Audiology at Western Washington University (1988), and a PhD in Audiology at the University of Oklahoma (1993). He has worked as a clinical audiologist, and also in the hearing aid manufacturing sector (Unitron). He taught audiology at Auburn University in Alabama (1993-95) and also at Western University in Ontario Canada (2001-06). In 2006 he initiated, developed and implemented the HIS program at Conestoga College in Kitchener Ontario. Since September 2015, Ted has been teaching on a part-time basis in the online Hearing Instrument Sciences program at Ozarks Technical Community College in Springfield Missouri. Since September 2017 he has been teaching full-time in the Hearing Instrument Practitioner program at Douglas College in Coquitlam BC. Ted is the author of a textbook, *Compression for Clinicians*, which has just been rewritten and available as a 3rd edition.*

Wednesday, May 10, 2018 - Pure Tone & Speech Audiometry: A Closer Look, presented by Ted Venema

We perform pure tone and speech audiometry every day, but are we all aware of the how's and why's behind some of our procedures? First of all, we should be sure to know and appreciate why the "oddiogram" is upside down; that is, why the numbers increase going downward. Who did this to us? Where does "dB HL" come from and what does "0 dB HL" truly represent? To know that, we must first know where 0 dB SPL comes from; namely, the softest it takes to hear a 1000 Hz tone at 1 metre distance, with both ears. If we play this "game across the frequencies, we find very uneven hearing across the frequencies; this is known as "minimal audible field" (MAF). If we continue the same game with 1 ear under a head phone we will again encounter a similar but slightly different finding known as "minimal audible pressure" (MAP); *this is actually 0 dB HL*, and it is the reason our audiometers are calibrated each year. Here's another question: why do we perform an ascending/descending pure tone threshold procedure? Where did that come from? Let's turn our attention to speech audiometry. *Why* do we use spondee words for Speech Reception Threshold (SRT) testing, and why can't we use single syllable words for that? *Why must* we use single syllable words for speech discrimination (SD) testing? In speech testing, what does "phonetically balanced" really mean? We will conclude with a look at Speech-in-noise testing; specifically, the speech-in-Noise (SIN) test.

Learning Outcomes

At the end of this session, attendees will be able to:

1. explain the origin of "0 dB HL," and the rationale behind the ascending/descending procedure
2. describe why spondee words are used for SRT versus single syllable words are used SD testing
3. discuss the speech-in-noise test

Thursday, May 10, 2018 - Demystifying Tinnitus, presented by Ted Venema

Tinnitus is a prevalent symptom reported by many clients who come to see us. It is treated however, in a way that is much like allergies are treated by physicians. As clinicians, we often feel as helpless as the clients who ask us for help. Unlike signs which can be seen, Tinnitus is for the most part, a subjectively reported symptom. The only person who hears it is the client. The causes of Tinnitus are not straightforward, and the available “cures” for Tinnitus are elusive. The most we often can muster is the hackneyed advice to avoid quiet and to put on a fan or air conditioner. While these suggestions are often helpful, we can go somewhat further. The purpose of this seminar is to familiarize clinicians with Tinnitus in more detail. We will explore some of the *causes* of Tinnitus, as well the *actual intensity* of most Tinnitus as it is experienced by many clients. It can be very helpful for clinicians to measure one’s Tinnitus so as to characterize it as closely as possible. This can serve to alleviate the fears of clients and also show them that we are professionals operating in the business of hearing health care. Treatments for Tinnitus fall into two main camps: masking and psychology. We will compare and contrast some of the masking and psychological approaches to treating Tinnitus today. Fortunately, one of the best treatments for Tinnitus is the use of hearing aids!

Learning Outcomes

At the end of this session, attendees will be able to:

1. describe the general causes of Tinnitus
2. outline some approaches whereby to measure Tinnitus
3. compare and contrast some of the main treatments of Tinnitus today

GLASS TIGER



Friday May 11th

5:45pm Cocktail Reception

8:00pm Glass Tiger performs

Presented by Phonak Canada

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Wednesday - May 9, 2018

<u>Time</u>	<u>Room</u>	<u>Event</u>	<u>Sponsor</u>
12:00-7:00pm	Grand Hall Foyer	Registration	AHIP
1:45-2:45pm	Grand Hall E	SEMINAR: <i>Mark Peterson, H.I.S.: Maximizing Your Potential</i>	Connect Hearing
2:45-4:30pm	Grand Hall E	SEMINAR: <i>Robert Sweetow, Ph. D.: The Impact of Cognition on Hearing Aid Use</i>	
4:30-4:45pm	Grand Hall Foyer	ReSound's Coffee Break	ReSound
4:45-6:30pm	Grand Hall E	SEMINAR: <i>Ted Venema, Ph.D.: Pure Tone & Speech Audiometry: A Closer Look</i>	
6:30-12:00am	Grand Hall C & D	Unitron's Dinner / Headphone Disco	Unitron

Thursday - May 10, 2018

<u>Time</u>	<u>Room</u>	<u>Event</u>	<u>Sponsor</u>
8:30-10:30am	Grand Hall Foyer	Registration	AHIP
7:00-8:00am	Watermark/Grand Café (Hilton)	Breakfast Buffet	
8:30-10:15am	Grand Hall E	SEMINAR: <i>Exhibitors: Why Should I Stop By?</i>	Exhibitors
10:15-10:30am	Grand Hall Foyer	Emsee Lab's Coffee Break	Emsee Labs
10:30-12:15pm	Grand Hall A	Manufacturers' Exhibits- Yellow Group	CAEA
10:30-12:15pm	Grand Hall B	Manufacturers' Exhibits - Blue Group	CAEA
12:15-2:00pm	Grand Hall C & D	Bernafon's Lunch	Bernafon+AHIP
2:00-3:45pm	Grand Hall B	Manufacturers' Exhibits- Yellow Group	CAEA
2:00-3:45pm	Grand Hall A	Manufacturers' Exhibits - Blue Group	CAEA
3:30-4:00pm	Grand Hall Foyer	Ice Cream Anyone?	
3:45-4:00pm	Grand Hall A & B	Manufacturers' Draws	CAEA
4:00-4:30pm	Grand Hall Foyer	Tables can be registered <u>throughout</u> Symposium. Last Chance to book your Gala Seat	
4:00-5:45pm	Grand Hall E	SEMINAR: <i>Ted Venema, Ph. D.: Demystifying Tinnitus</i>	AHIP
9:00-11:00pm	Grand Hall C & D	Cheers to Exhibitors - Cocktails with AHIPsters	AHIP

Friday - May 11, 2018

<u>Time</u>	<u>Room</u>	<u>Event</u>	<u>Sponsor</u>
7:00-8:15am	Watermark/Grand Café (Hilton)	Breakfast Buffet	
8:30am-12:00pm	Grand Hall E	AHIP's AGM - Members Only	AHIP
10:00-10:15am	Grand Hall Foyer	EMI's Coffee Break	EMI
12:00-1:10pm	Grand Hall C & D	Starkey's Lunch	Starkey
5:45-6:30pm	Grand Hall Foyer	Phonak's Cocktail Reception	Phonak
6:30 sharp!	Grand Hall C & D	Widex's Gala Dinner	Widex
8:00-9:00pm	Grand Hall C & D	Phonak's Entertainment: Glass Tiger	Phonak
9:00-1:00am	Grand Hall C & D	Party with DJ	

All Seminars & AGM Captioned

108 Unitron
107 Unitron
106 Unitron
105 Audiometrics
104 The Hearing Network
103 Beltone
102 Starkey
101 Starkey
100 Starkey

205
ReSound

HALL "A"

204 Hearing Life Canada	209 Connect Hearing
203 Simply Hearing	210 Connect Hearing
202 Widex	211 Helix Hearing
201 Widex	212 Cycle Net
200 Widex	213 EMI

308
Hear Canada

HALL "B"

304 Sivantos	309 Sivantos
303 Phonak	310 Nupur Tech
302 Phonak	311 Emsee Labs
301 Phonak	312 Bernafon
300 Phonak	313 Bernafon

407 HearWare
406 Cowan Ins
405 Genie Audio
404 DiaTec
403 DiaTec
402 Oticon
401 Oticon
400 Oticon

Register Now

The International Hearing Society is proud to present the

TINNITUS Care Provider Certificate Program

November 9-10, 2018

**The Westin Wall Centre, Vancouver Airport
Vancouver, British Columbia, Canada**

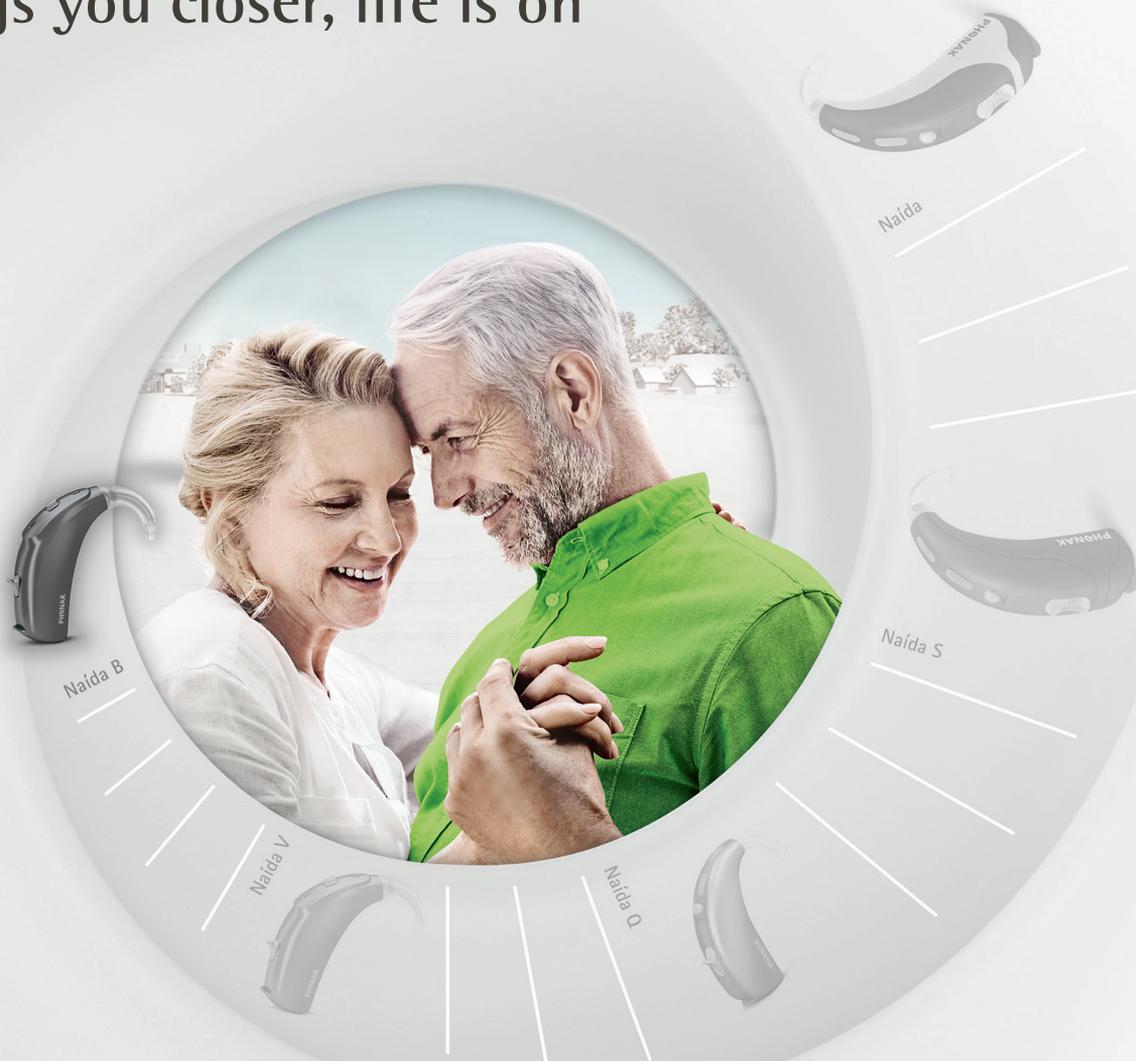


The **Tinnitus Care Provider Certificate Program** provides an educational opportunity for **Hearing Healthcare Professionals to:**

- ◀◀ Gain knowledge to help your patients with tinnitus
- ◀◀ Improve your skills
- ◀◀ Implement tinnitus management as part of your practice
- ◀◀ Earn 16 continuing education credits

Register at
www.ihinfo.org/Tinnitus

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NEW
Pure Charge&Go Nx



Pure Charge&Go Nx: Own Voice Processing (OVP™) is now rechargeable!

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Wearers of this ultimate RIC with Li-Ion technology enjoy a natural sounding own voice, battery-free handling, and direct streaming via Bluetooth. Simply Charge&Go!

For more information visit www.signia-pro.ca/signia-nx or contact your local territory manager



Pure Charge&Go Nx
with charger

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**Starkey® Hearing Technologies has helped
millions of people hear better.**

We believe better hearing leads to more happiness, more connections, more everything. Visit our booth and find out how our products are bring smiles to your patients faces.

*Starkey is proud to be sponsoring the AHIP lunch on
Friday May 11 from 12:00pm to 1:10pm in the Grand Hall C & D.*



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Introducing Muse iQ Rechargeable – the hearing technology you’ve been waiting for.

Our best hearing technology just got better.

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1.800.387.9353 for more details*

Muse iQ^R

Classifieds

Office Space for Rent to Hearing Instrument Specialist

New, beautiful and clean office space available for rent in a Wellness Centre located in Bowmanville, ON. We are currently seeking a Hearing Instrument Specialist who has a passion for helping people. We are looking to create a comfortable, positive and team-oriented work environment for a team of like-minded professionals to work alongside each

other. Offering front desk reception for support. Modern office space. Also includes free and ample parking. Internet and utilities included. Great opportunity to establish your practice in a growing community. Please contact us for details at info@precisiondenture.com

Classifieds



The Ear & Hearing Clinic is Growing Again.

We are looking for a full time Hearing Instrument Specialist to join our team of professionals.

Some travel would be involved. A reliable vehicle is required.

Please submit your resume to Karen@earandhearingclinic.com.

Classifieds

Position: Hearing Instrument Specialist



Meridian Hearing is searching for a full time or part time Hearing Instrument Specialist for our clinics in South Western Ontario. We are a patient

focused practice that uses a team approach to patient care. Join our growing team and expand your clinic skills while working with Doctor of Audiology Brian Field.

SCOPE OF POSITION

The Hearing Instrument Specialist (H.I.S.) is a member of the clinical and clinical support team

and is responsible for audiometry testing utilizing standardized evaluation procedures and for prevention and restorative hearing care through prescription and fitting of hearing aids, custom hearing protection, and assistive listening devices for patients assigned to his or her caseload by the Centre.

Another key responsibility of the Hearing Instrument Specialist is to build the volume of new patients at Meridian Hearing through promotion of Meridian Hearing's services, building the referral network, maintaining caseload guidelines and building their caseload while ensuring effective patient outcomes and excellent customer service.

Meridian Hearing is a team based clinic. Our Hearing Instrument Specialists also help with duties such as answering the phone, ordering hearing aids, taking payments, sending reports to doctors, making patient phone calls and managing third party billing.

The key responsibility areas for this position include:

- A. Direct Patient Care – Assessment and Fitting
- B. Follow-up Care and Hearing Aid Maintenance
- C. Indirect Patient Care

- D. Conduct Meridian Hearing Promotions and PR including Doctor Front Office Visits
- E. Patient Service Coordinator Duties

QUALIFICATIONS AND REQUIREMENTS

- Successful completion of a recognized Hearing Instrument Specialist program
- Registered Member of the Association of Hearing Instrument Practitioners of Ontario
- Strong interpersonal, communication, and organizational skills
- Evidence of the love of working with people
- Evidence of the ongoing quest for learning
- Computer literacy
- Evidence of an understanding of the business practices of private audiology practice
- Evidence of flexibility, adaptability, and team player skills
- Regular access to a car for transportation between clinic locations and client sites

To apply please send your cover letter and resume to apply@meridianhearingcentre.com



Go ahead, answer the call

From our favourite sounds to the conversations that change our lives, we invite you to celebrate each and every one with us at this year's Symposium.

Get the conversation started with us at the Symposium dinner and then visit us at booths 106-108 for a colourful favourite sound experience!

2018 Symposium Dinner
and Headphone Disco

Wednesday, May 9, 2018
Grand Hall C & D at 6:30pm
Fallsview Casino Resort

unitron. Hearing matters