

THE VOICE

of the

LARYNGECTOMEE CLUB OF MONTGOMERY COUNTY
SILVER SPRING, MARYLAND

SERVING THE GREATER WASHINGTON, DC METROPOLITAN AREA

Established in 1970

Affiliated with the American Cancer Society South Atlantic Division, Inc
Member of the International Association of Laryngectomees



NOVEMBER, 2012

MARK YOUR CALENDAR

THE LARYNGECTOMEE CLUB
OF MONTGOMERY COUNTY

Wednesday Nov. 14th

10:30 AM

Socializing and Refreshments

11:00 AM

Business & Social Meeting
Refreshments to be furnished by:
HELEN KANE

NEW MEETING LOCATION

Christ Congregational Church
9525 Colesville Road
Silver Spring, MD 20901

FOR INFORMATION
CONTACT: HERB SIMON
301-588-2352 or
H457@aol.com

November 17, 2012



**The Great American
Smokeout**

THANKSGIVING POEM



MAY YOUR STUFFING BE TASTY,
MAY YOUR TURKEY BE PLUMP,
MAY YOUR POTATOES 'N GRAVY
HAVE NARY A LUMP,
MAY YOUR YAMS BE DELICIOUS,
MAY YOUR PIES TAKE THE PRIZE,
MAY YOUR THANKSGIVING DINNER
STAY OFF OF YOUR THIGHS.

Happy Thanksgiving!

HAPPY BIRTHDAY



Nov. 4th Betty Money
Nov. 8th Steve Curran
Nov. 11th Dr. Lou Laborwit
Nov. 16th Lorenzo DiCasaGrande
Nov. 16th Paul Harrison
Nov. 17th Pat Warren
Nov. 20th/34 Mary Ann Miller
Nov. 26th Linda Diggs
Nov. 26th Odessa Robinson
Nov. 26th Terry Thomas
Nov. 28th Paul Corridean



HAVE YOU GOTTEN YOUR FLU SHOT YET?



If you haven't gotten your flu shot yet and want to find out where you can get one near you, go to:

<http://flushot.healthmap.org/>

“A strong positive mental attitude will create more miracles than any wonder drug.”

---Patricia Neal

MEETING MINUTES

October 10, 2012

President Stanley Lipscomb called the meeting to order at 11:07 AM. Others attending this meeting were Helen Kane, Rich Hunt, Addie Shaw, Betty Money, Herb & Sally Simon, Mamie Redman, Michel Pommier, Nick Goodpaster, Joan Garg, Albert Turner, Charles Pickett, Peggy Bradberry and guest speaker Mandy Pietropaolo. **Nick Goodpaster** read the Prayer for a Laryngectomee using his TEP voice. We all introduced ourselves with the laryngectomees telling when and where their surgeries were performed. Everyone was pleased to welcome **Rich Hunt** to our group. Rich, who has undergone extensive surgery and is presently unable to articulate, had received a copy of our newsletter the day before the meeting. He communicated with Herb via email and joined us today. He said he was pleased and encouraged by club members. We were both surprised and happy to see **Peggy**, who greeted everyone with her beautiful smile. She reported that she is still undergoing chemo but things look promising. The minutes for the September meeting were unanimously approved as published in the October issue of *The Voice*.

Treasurer's Report: **Treasurer Herb Simon** reported that the club Treasury had little change. He gave us a summary of the four checks and two deposits that had been made since our last meeting in July.

Aunt Bea's Sunshine Report: Herb reported the following: **Itzhak Brook** was unable to attend the meeting because he was traveling home from presentations he made in Phoenix, AZ. **Bill and Annetta Rapp** were also unable to join us but sent their "Hi to All".

Old Business: Herb passed around photos from our picnic and said all were welcome to take whichever ones they would like.

New Business: Herb received a request for our assistance in purchasing more wigs for the ACS Look Good, Feel Better Program. A motion was made and approved to donate \$500 to this worthy cause. **Mandy Pietropaolo**, Clinical Specialist and Middle Atlantic Sales Manager for Atos Medical, Inc., joined our meeting and we all reintroduced ourselves. Mandy had conducted a well attended speech class before the meeting. She introduced the new Griffin Liberty electrolarynx, a less expensive product that operates on AA batteries. She suggested this as a back-up unit, but also recommended that we check with our insurance companies to determine which type of electrolarynx would be most financially feasible. She passed the Liberty around for all to try. Mandy spoke briefly about Therabite, a product for radiation patients experiencing problems opening their jaw. **Sally** said massage can also help. Mandy told us that Atos has an Education Department and more information about this and their products can be found at: <http://www.atosmedical.us/>

General Discussion: **Nick** shared that he is experiencing a problem with his TEP puncture closing and that it may need to be sutured and another TEP performed. **Michel** said that he had this done and the procedure was successful. **Stanley** told us that he has been experiencing more keloids because of auto accident injuries and that once again Kenalog-40 injections are helping. **Stanley** thanked **Mandy** for conducting the speech class and sharing the Liberty with us. Thanks were given to **Stanley** for the delicious refreshments. **Helen** volunteered to bring the refreshments to the November meeting. The meeting was adjourned at 12:05 P.M.

---Respectfully submitted by
Helen Kane

FROM THE SERVOX GURU



Well, my friend Herb Simon has asked me to write another story about my simple ideas for Laryngectomees. This one is about the artificial larynx bumpers that I discovered at a Laryngectomee conference in Kansas City. While doing repairs and showing my wares at the conference, I noticed a gentleman who had a bright yellow cap covering the battery end of his Servox. I asked him what it was and where he got it. He told me that it was a mail tube cover and that he got it from the company he worked for in Iowa. He said that it protected his Servox battery cover from cracking or breaking when his Servox took the occasional knock. I thought that this was a brilliant idea and arranged to have a "goodly sum" purchased. We modify the bumper somewhat by punching a hole in the center of it allowing for easy on and off capability. If the hole was not there, the suction created by the snug fit would make removing it more difficult. The bumper must be removed from the instrument in order to charge the instrument in the charger base.

Now when I do repairs at club meetings and Laryngectomee conferences, each repair automatically gets one of these "bumpers" to protect the battery cover. We have them in 3 colors now: bright yellow, bright orange and dark navy blue. The blue ones fit instruments like the TruTone, NuVois and SolaTone. They are a bit more snug.

So if you ever see a bright yellow or bright orange appendage on someone's Servox, you'll know where it came from.

---by *Jim Lauder*
(the Servox Guru)

PRE & POST-OP LARYNGECTOMEES VISITS

Sept. 30th: Herb Simon went to the Washington Adventist Hospital in Takoma Park, MD to visit with pre-op patient **Yusufu Mansaray**. Yusufu is a Nurse in the Behavioral Health Department at the Shady Grove Adventist Hospital. He is 59 years old and is originally from Sierra Leone. Yusufu lives in New Carrollton, MD. with his wife Jaka and 4 children. He jogs and works out a lot and likes to socialize with family and friends and associates at work. He hopes to return to work, but is very concerned about his ability to speak and be understood following his upcoming laryngectomy. After Herb and Yusufu talked alone for about a half an hour, two of his daughters, 21 year old **Seray** and 15 year old **Isha** arrived. They asked many excellent questions. A little while later **Jaka** and Isha's twin sister **Amy** arrived and also had some good questions. Seray tried speaking with Herb's electro-larynx and brought a smile to everyone's face when she was able to speak with it. Herb left an LCMC new laryngectomee information packet with them before leaving. Thanks to go out to **Dr. David Bianchi** for helping to arrange this visit for his patient.

Oct. 6th: Herb Simon visited with new laryngectomee **Patrick Ford** at his Forestville, MD home. Patrick is a retired 'over the road' truck driver. He enjoys fishing and hunting. Also present for this visit were his father, **James**, his good friends **Richard, Shirley Brown**, her mother **Jean** and daughter **Dasia**. Patrick had his surgery on Sept. 24th at Georgetown University Hospital. He looked well and smiled throughout this visit. He was speaking fairly well with his Servox loaner and oral adapter, and he would write down his thoughts, when he was not able to be understood. He said that he would like to be more understandable on the phone. He also had some questions regarding the base plate for his HME. Herb gave Patrick a new laryngectomee information kit, compliments of LCMC and went over the information with him. Thanks go out to **SLPs Eliza Peoples and Jayme Cappa** for this referral. **Editor's Note:** Patrick and his son Perry attended the LCMC speech class that preceded the October meeting, but they were not able to stay for the meeting.

Oct. 15th: Herb Simon went to the Inova Mount Vernon Hospital Rehabilitation Center in Alexandria, VA to visit with new laryngectomee **Jim Pinkert** and his wife **Anne**. Also present was **SLP Andrew Clare**, who arranged this visit. Jim, who is 89 years old, had his laryngectomy at Inova Fairfax Hospital on September 12th. He was a Maryland State Trooper for 31 years, attaining the rank of Lieutenant before retiring in 1989. Jim and Anne recently moved to a retirement community in Springfield, VA from their home in Ocean Pines, MD. Jim had an electro-larynx and is working on learning this method of speech. Herb gave the Pinkerts a new laryngectomee information packet from The New Voice Club of Northern Virginia.



Antibodies Protect Against Range of Flu Viruses

Scientists isolated **antibodies** (germ-fighting molecules made by the body) that protect mice against several deadly flu viruses. The accomplishment is a step toward a flu vaccine that can protect against multiple viral strains for several years.

Flu is caused by influenza viruses, which infect the nose, throat and lungs. These viruses constantly change, or mutate. Researchers need to reformulate the flu vaccine each year to match new strains. If a vaccine could prompt the body to make antibodies that latch onto unchanging parts of the virus, it might provide long-lasting protection.

NIH-funded researchers previously isolated antibodies that target a wide range of influenza "type A" viruses. Type A viruses are responsible for avian flu, the 1918 pandemic flu and seasonal flu.

In the new study, scientists took a similar approach to find antibodies that neutralize influenza "type B" viruses. Influenza B viruses have received less attention. They're less likely to cause worldwide outbreaks. But they can cause seasonal flu.

Researchers collected and tested antibodies from people recently vaccinated for seasonal flu. The scientists identified 3 antibodies that latched onto a specific region on different influenza B viruses. One of these 3 also bound type A viruses.

All 3 antibodies protected mice from deadly influenza B viruses. The broader-binding one also guarded against lethal doses of 2 types of influenza A viruses.

"To develop a truly universal flu vaccine or therapy, one needs to be able to provide protection against influenza A and influenza B viruses," says one of the head authors, Dr. Ian A. Wilson of the Scripps Research Institute. "With this report, we now have broadly neutralizing antibodies against both."

---Reprinted from

The National Institutes of Health Newsletter

October, 2012 Issue

Snowflakes melt alone — but together they can be traffic stoppers!

THE HISTORY OF SPEECH AFTER LARYNGECTOMY

*By Richard Crum
Consultant for Inhealth*



Most of us that have had a laryngectomy are primarily interested in freeing our selves from cancer. We seldom think of what happened in the past concerning head and neck cancer treatment. The first laryngectomy was performed in 1873. Just imagine what it was like to have had a total laryngectomy in that time, so long ago. No modern anesthetic or an understanding about infections. From the very beginning there was a deep concern about speech after a total laryngectomy. There were many attempts to restore speech.

In the 1920 a butcher in Chicago had a laryngectomy. He knew from his work killing hogs that if one could get air from their lungs into the esophagus that sound could be produced using the folds of skin in the esophagus. He was, after all, just a butcher and not a doctor, so he could not find anyone that would listen to him. He took an ice pick, heated it and made a hole in the wall separating the trachea (air tube) into his esophagus (food tube). He put his finger over his stoma and lo and behold he could speak. He used a quill from a goose with a string tied around it to put into the puncture he had made. When he was not speaking this kept fluid out of his lungs. When he wanted to speak he would take out the quill and cover his stoma and speak.

Nothing came from his experiment, after all he was not a doctor, however, one doctor took notice and wrote a one page letter about the butchers experiment. This was in the 1920's and nothing came of the letter.

In 1940's the electro-larynx was invented using technology invented by Western Electric. At that time the only rehabilitation for a person with a laryngectomy was esophageal speech. Most people can learn esophageal speech however it usually takes a great deal of practice and some cannot master it. The invention of an electro-larynx was a great improvement for many people.

In the early 1970's Dr. Eric Blom was doing his work on his Ph.D. in Speech Pathology. He discovered the letter about the butcher and his puncture. Dr. Blom was working in Indianapolis with a young MD, Dr. Mark Singer. Together they had an epiphany. Dr. Blom said I think I can make a better quill and Dr. Singer said I think that I can make a better ice pick. The TEP (Tracheo-esophageal speech) was first discovered.

Thanks to the insight of a butcher in Chicago and the work by two medical professionals we now have another means of communication after a laryngectomy. I hope that I have given you a little insight into the history of speech after a total laryngectomy.