

# AUDIENS

The Newsletter of the  
British Association of Paediatricians in Audiology



Issue No. 45

April 2010

P C WERTH ADVERT

# AUDIENS

The Newsletter of the British Association of Paediatricians in Audiology

*BAPA is registered as a charity, No.1019567*

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*Front Cover: 'A Triumvirate of Chairs: (left to right)*

*Professor Adrian Davis (immediate past chairman, BSA), Mr Robin Youngs (President, section of Otology, RSM), Dr Adrian Dighe (retiring chairperson, BAPA)*

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#### Disclaimer

The views expressed in this newsletter are not necessarily the views held by the British Association of Paediatricians in Audiology

#### Any changes?

If any of your details have changed, please let BAPA know by sending your details to Ann Mackinnon : [ann.mackinnon@nhs.net](mailto:ann.mackinnon@nhs.net)

Please be sure to include the following:

Name, Address, Post code. Preferred Email address, Home Tel. No. and Work Tel. No.

## Editorial

*Jeanette Nicholls, Newsletter Editor.*

Meeting the deadline for this newsletter has been set with many difficulties, not least the unreturned emails. The general level of workload that each of us tries to sustain to satisfy ourselves and the Trusts that we each work for results in me being rather a nag when it comes to getting the articles ready for Alan Batchelor to typeset and then print ready to land on your doorstep for the beginning of April. That is the pressure I put on myself: it is an April edition and therefore should arrive at the beginning of the month! So hopefully I can wish you all a Happy Easter in time.

Elaine English emailed me regarding a comment I made in the last editorial and wanted to clarify the situation of unilateral NCR follow up in Wales. They do assess all high risk one ear CR babies, it is only the well baby one ear CR that are discharged from the programme with an option of a re-screen in audiology or a targeted behavioural test (TBT). Therefore all the parental requests for TBT following a one ear CR as reported in her article were well babies.

I endeavour to get a wide level of participation so that the pressure does not fall on the same small group of people but if you want to continue with a newsletter then we really need the wider membership to support it by contributing every now and then. So I have a big thank you this time to Gillian Painter, Winifred Baddoo and Mathana Sathananthan for the time they took out of their busy schedules to contribute. Gillian Painter has also put together the programme

for the RCPCH meeting and as one of the people who agreed to present and at the time of writing this I have yet to start preparing my presentation. I hope that many of you will give your physical support to both the guest speakers and your fellow BAPA colleagues at the BAPA SIG meeting. Last year was very much like the "last supper", by way of numbers who attended.

The RCPCH Annual Conference is the major education event of year for paediatricians and for the last two years BAPA has been invited to organise a session during the meeting. This year, for the first time, the meeting is being held at Warwick University from 20th to 22nd April.

The BAPA session is on 22nd during the afternoon with an interesting and varied programme for us to attend. Adrian Dighe, our retiring chairperson will chair the proceedings. The programme is as follows-

13.00-13.45

*Guest lecture: Multidisciplinary Management of Paediatric Tinnitus, Ms Rosie Kentish Consultant Clinical Psychologist, Nuffield Hearing and Speech Centre, RTNE*

13.45-14.00

*Two cases of Deaf Children in Need placed on the Child Protection register. Dr Veronica Hickson*

14.00-14.15

*Hearing tests in children with cystic fibrosis. Dr Sarah Higgs*

14.15-14.30

*A parental questionnaire seeking their views on how they were told about their child's permanent hearing loss. Dr Gillian Painter*



**For “sometimes”, where stated, the decision was based on:**

|                          |   |
|--------------------------|---|
| Parental request         | 6 |
| Progressive / late onset | 4 |
| Severe / profound        | 1 |
| Family history           | 1 |
| Only newly confirmed     | 2 |

**Who carries out the investigations?**

|                         |    |
|-------------------------|----|
| Do it themselves        | 39 |
| Hospital Paediatricians | 4  |
| ENT                     | 9  |
| Audiological Physicians | 15 |
| CCP Aud                 | 6  |
| As Sp Paed Aud          | 1  |
| CCP                     | 1  |

**For children with USHI identified through NHSP, which are offered investigations?**

|            |    |
|------------|----|
| None       | 3  |
| Some       | 39 |
| All        | 25 |
| Don't know | 2  |

**For children with USHI identified through surveillance, which are offered investigations?**

|      |    |
|------|----|
| None | 1  |
| Some | 47 |
| All  | 19 |

**Which investigations could be carried out currently?**

**MRI**

|                          |    |
|--------------------------|----|
| Easily                   | 52 |
| With management approval | 10 |
| Not possible             | 3  |

**Connexin 26**

|                          |    |
|--------------------------|----|
| Easily                   | 53 |
| With management approval | 5  |
| Not possible             | 3  |
| Via genetics             | 4  |
| Don't know               | 1  |

**CMV**

|                          |    |
|--------------------------|----|
| Easily                   | 42 |
| With management approval | 15 |
| Not possible             | 5  |
| Don't know               | 1  |
| Never tried              | 3  |



## Comments included:

Too expensive

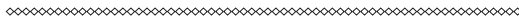
Who pays?

Difficult to retrieve sample

Guthrie cards are only kept until a child is 6 years of age

From the replies received it does appear that these investigations are available to the majority of BAPA members. From some of the general comments there are probably more who are now offering investigations with the publication of the national guidelines. There is a lot of

interest in care pathways and how they improve patient care. There may be opportunities to bid for funding to carry out a national audit of the aetiological investigations carried out in children with USHI, taking standards from the guidelines. Watch this space.



### **Reflections of the London Study Days: ‘The Ear and the Child’ and the Vestibular Workshop.**

*Jeanette Nicholls, Associate Specialist, Birmingham; Winifred Baddoo, Associate Specialist, Doncaster Royal Infirmary and Mathana Sathanathan, Associate Specialist, Heart of Hounslow Centre for Health.*

It was the journey back from London, after the vestibular workshop, whilst relaxing on the train that I had my “Eureka moment.” When the Halmagyi test really made sense in relation to the anatomy and physiology of the vestibular system and why all the various other tests were necessary when screening for a problem. I’m not sure what the other passengers made of my miming out the various movements but as I am unlikely to meet any of them again walking down the street, am I bovvered?!!!!

Any previous doubts on my part that vestibular screening is not necessary in the community were dispelled once I had heard again, Anne-Marie Rine’s presentation on her work with dynamic visual acuity and the impact that an abnormality in this has on the reading ability of children who have vestibular impairment. So whilst one cannot correct the damage to the vestibular system the

negative effects on the child’s education can be ameliorated with rehabilitation, but only if the vestibular hypofunction is identified. Good-Lite who have an



advert in this copy are celebrating their 80th anniversary this year having started out producing the Good-Lite medical headlight and later vision equipment. They are the exclusive worldwide



Interaccoustics Advert

manufacturers of the LEA symbols equipment which was developed by lea Hyvärinen MD of Helsinki, Finland and is used to test the dynamic visual



acuity. It could easily be incorporated in the assessment process of our deaf children. It may be something to discuss with our local orthoptists particularly as the American Academy of Pediatrics already include the LEA symbols on their list of recommended tests for preschool vision testing.

For more from the study days see the report and photographs to see what you missed or enjoy reliving some of the action!! We have been able to secure the use of the Frenzel equipment in Birmingham and plan to start practising with it later in the spring prior to hopefully putting the case forward for a community vestibular clinic. A report will appear in the autumn newsletter with any luck.

**Mathana reports on the joint meeting on the Thursday and gives her thoughts on the future.**

*'The ear and the child' on the 14th and 'vestibular workshop' on the 15th of January held at the Royal Society of Medicine were very well organised and it was a real treat for the course participants. Organisers need to be congratulated for arranging the highly*

*relevant and stimulating topics.*

*It was very interesting to hear from Professor Colwyn Trevarthen the biologist's perspective of newborn's innate ability to share experience in the form of vocalisation and movement in a rhythmical manner. The video of the preterm baby showing the reciprocal rhythmical vocalisation and movement of hand in response to father's voice was an amazing picture to watch. I wonder if showing these types of videos in ante-natal classes for parents may raise the awareness of how important and rewarding early communication is with children.*

*Dr Rosalinda Baca's presentation on her study about language development in deaf children confirmed what is mostly known already. Better outcomes were seen in children with milder hearing loss, early identification and in children who had high non-verbal cognitive ability.*

*Aetiological investigation of hearing loss presented by Dr Breege MacArdle was very useful and highly relevant.*



*Her approach to investigation on the basis of hearing loss with either normal or hypo-function of the vestibular system emphasised that no clinician*

with responsibility for organising investigations into the cause of hearing loss can take a relaxed attitude towards clinical balance assessment.



Vestibular presentations on the day one together with the workshop on the 2nd day were very useful and helped to recap what was learnt in the Cambridge vestibular course in 2008. The workshop has especially helped me to learn some of the skills in assessment which I did not manage to grasp fully in the first instance. I would like to add here that after the Cambridge course I gave a feedback presentation to my paediatric colleagues in the Child Development Clinic and to my consultant colleague in Audiology and have developed a local guideline for clinical balance assessment which both the consultant and I use an aide memoire whenever we carry out clinical balance assessments.

**Winifred Baddoo continues with her thoughts of the two days in London having previously attended the BAPA Vestibular Course in Cambridge.**

*"I have now emerged much more knowledgeable and confident about vestibular testing/screening (no expert but a confident beginner who hopefully will progress at a moderate pace. I*  
*BAPA Newsletter April 2010*

*felt that this workshop put important information into a nutshell and gave us the practical expertise we need for our own practice (individual tutoring was an excellent idea). I have come away with a good idea of particular pieces of equipment that I can put together myself and just wish that the Frenzel glasses were not quite as expensive. A follow on workshop to the vestibular course was exactly what I needed."*

Analysis of the study days will appear in the October edition but I think that we all left feeling that the whole idea of testing children was no longer so 'scary' and from the pictures you can see that we had a good time practicing our skills on one another!!



Photos :

P10 (left to Right):

*Dr Sylvette Wiener-Vacher, Professor Margaretha Casselbrant, Professor Rose Marie Rine.*

*Rose Marie testing.*

P11: BAPA delegates practising their skills.

Good-Lite Advert

## Letter of Thanks

8 Staffa Road. Loose,  
Maidstone ME15 9ST  
keithstewart69@btinternet.com  
30th November 2009

Dear Adrian

This was supposed to be written several weeks ago and I hope my gratitude does not appear diminished by the delay. Firstly I want to thank you, personally, for the encomium published in Audiens (No. 44). Factually it is correct, but I am somewhat embarrassed by the hyperbole: whatever I did within the BAPA umbrella was done because it was fun. It is also true that the BAPA family gives back far more than an individual can put in, so I am really flattered to have been accepted into the fold at a rather late stage in my medical career and to have received so much support and help from friends and colleagues.

Paediatric audiological medicine is at times a lonely profession but BAPA and the audit and governance group in the south east provide friends with whom to discuss problems or just chew the cud. In retirement, the need for the professional contact is absent but the friendships remain and that is why I am so appreciative of being awarded life membership of BAPA, though I'm not sure I am worthy. Please, pass my most grateful thanks to the Executive for honouring me in this way. Pam is basking in the distinction of her honourable mention and sends her heartfelt thanks.

I look forward to seeing everyone at the Royal Society of Medicine in January.

With very many thanks to you and the Executive and I extend Pam's and my best wishes to you and all the membership.

Yours sincerely

*Keith Stewart*

## Yorkshire and North East region report Northern “Networking” meeting 09/12/2009

This was our first meeting for well over a year, the idea being generated by a recent NHSP QA visit.

The agenda was kept purposely short to allow plenty of space for discussion and general exchange of ideas. We had two speakers — Guy Millman, a Consultant Paediatrician and lead for NHSP from York and Florence McDonagh, a Consultant Community Paediatrician in Audiology and NHSP lead for Leeds.

Dr Millman gave a very interesting presentation on aetiological

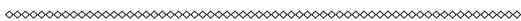
investigations of hearing loss from a neonatologist’s point of view.

Dr McDonagh spoke about the pathways in Leeds for children diagnosed from the Neonatal Screen.

Points raised and discussed showed how different sites varied in how they approached diagnosis and aetiological investigation.

We agreed that we should aim to meet twice a year.

*Dr Kathleen Coats, regional representative*



## Scottish BAPA Study day- 6th November 2009.

Scottish BAPA held its 2 yearly study day in November entitled “Deaf or What?” We hoped to explore, and hopefully get some answers on, how to manage difficult children who have normal audiograms but struggle to hear.

We had good attendance from a variety of professionals including paediatricians, audiologists, speech therapists and teachers all giving positive feedback on the day.

The day started with a talk from Prof Ann O’Hare from Edinburgh on the overlap of specific language impairment and auditory processing problems followed by Melanie Griffiths updating us on the latest research on identifying APD. Melanie was disappointed to point out there is no good “test battery” for identifying APD yet. John Briggs,

from Cambridge, gave an interesting presentation on class room acoustics which linked in nicely with Barbara Burns (Tayside Ed Aud) presenting her experiences of using edulinks.

Dawn Lamerton (audiology Lothian) spoke about the development of the hyperacusis service and her experiences managing these children. Then Donald McAskill and Sandy Gardiner (Forth valley) did a double act on how to assess children with non organic hearing losses.

Overall the day was very good with excellent presentations from all speakers which were well received by all attending.

*Martina Stones, Staff Grade Paediatrician (Audiology), Tayside*

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October edition – all copy to be received by 15th August

April edition – all copy to be received by 15th February

Guymark half page Advert



**10th Paediatric Audiology Interest Group Conference**  
**Hilton Sheffield Hotel, Thursday 13th May 2010**  
**'ANSD – Is the Message getting Through?'**

**Draft Programme**

Registration Form is available on [www.thebsa.org.uk](http://www.thebsa.org.uk)

**Chairman: Dr Sebastian Hendricks**

- 9.00 Registration and Coffee
- 9.25 Housekeeping and introduction of the day - *Dr Kelvin Wakeham, PAIG Chairman, Royal Devon & Exeter Hospital*
- 9.30 Chairman's address - *Dr Sebastian Hendricks, Paediatric Services, Edgware Community Hospital*
- 9.40 Paediatric risk factors, categorisation, aetiology and outcome predictors  
**Keynote speaker** - *Dr Tony Sirimanna, Great Ormond Street Hospital, London*
- 10.20 NHSP data, perceived consensus, evidence, UK figures – *Dr Graham Sutton, Human Communication & Deafness, Manchester University*
- 10.50 Coffee and Exhibition
- 11.30 NDCS research update - Experiences of parents whose babies were identified with auditory neuropathy spectrum disorder through Newborn Hearing Screening programme  
*Maryanne Day, Human Communication & Deafness, Manchester University*
- 12.00 Evaluation of service provision in Wales for babies identified with ANSD following newborn hearing screening.  
*Dr Amanda Roberts, Divisional Coordinator NBHSW, Cardiff Nuffield Team*
- 12.30 Case Studies
- 12.50 Plenary Q's & A's
- 13.00 Lunch and Exhibition

**Afternoon session – Choice of two workshops from the following:**

- A: Audiological Dilemmas in ANSD (Case studies)  
*Christine Cameron (NHSP Audiological Advisor, MRC Manchester) & Rachel Foley (Audiological Scientist, Bristol Royal Hospital for Children)*
- B: Management of the Child with ANSD  
*Dr Tony Sirimanna*
- C: The Management of Children with ANSD in the Classroom  
*David Canning, Independent Educational Audiologist and Director of Hear2Learn Ltd*

14.00 - 14.45 Workshop 1

14.50 - 15.35 Workshop 2

15.45 PAIG Chair and Programme Chair closing remarks. Reports and Evaluations

16.15 Close of Meeting and Refreshments

***This meeting will carry points towards Continuing Professional Development***

# **6th Midlands Multidisciplinary Deafness Group Meeting**

**Thursday 27 May 2010**

**Education Resource Centre,  
Birmingham Women's Hospital, B15 2TG**

## **Visual Problems associated with Hearing Loss**

- 9.00-9.15      Registration and refreshments
- 9.15-9.45      Miss Lucilla Butler — Consultant Ophthalmic Surgeon,  
Birmingham and Midlands Eye Centre
- 9.45-10.15      Clinical Geneticist
- 10.15-10.45      A Parent Perspective of Usher Syndrome — Gail Adams
- 10.45-11.00      Refreshments
- 11.00-11.20      LOOK (National Federation for Families with Visually  
Impaired Children) — Jane Bateman

### **Case presentations with time for discussion**

11.20-11.50

11.50-12.10

12.10-12.30

Meeting ends

Please contact [jeanette.nicholls@sbpct.nhs.uk](mailto:jeanette.nicholls@sbpct.nhs.uk) to register

3 CPD Points Approved    cost for refreshments £2 (bring on the day)

## **The BAPA Annual Prize Rules**

1. The award is named the BAPA Annual Prize
2. Any BAPA member (Full, Associate or Retired) will be eligible for the award apart from members of the Panel (see below)
3. The award will be given for work that promotes the aims of BAPA, which are:
  - (a) The promotion of standards in both training and professional qualifications of paediatricians working in audiovestibular medicine and to contribute to the training of other professionals working in related disciplines.
  - (b) The promotion of multidisciplinary working for the benefit of children and their families.
  - (c) The promotion of multidisciplinary working by maintaining and developing links with other professional bodies.
  - (d) The holding of meetings, lectures and discussions in various regions and the publication at regular intervals of a newsletter for members.
4. This work can be in the form of:
  - (a) a report or publication
  - (b) a presentation to an educational or audit meeting
  - (c) an outstanding contribution to service development and/or multi-disciplinary working.
5. Candidates can themselves apply for the Prize by submitting a report or presentation. Alternatively candidates can be proposed by any full member of BAPA by submission of a citation.
6. The Awards Panel will comprise three assessors, two of whom are BAPA members (one of whom is a committee member) and one non-BAPA member who is actively involved in children's hearing services. The Panel will be nominated annually by the Committee.
7. Submissions should be sent to the Secretariat or Chairman by 30<sup>th</sup> September each year for consideration by the Panel. If the Panel agrees to make an award this will be presented at the next BAPA Annual General Meeting. If the recipient is unable to attend, the award will be presented in absentia.
8. The award will be in the form of tokens of the recipient's choosing. The value of the award is currently £250.

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