

Language Deprivation

What the Pediatrician needs to know

By
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OBJECTIVES

- Understand the basics of the Early Hearing Identification and Intervention System
- Gain awareness of importance of Early Language Introduction
- Hone communication skills to counsel families on the importance of the early introduction of language.

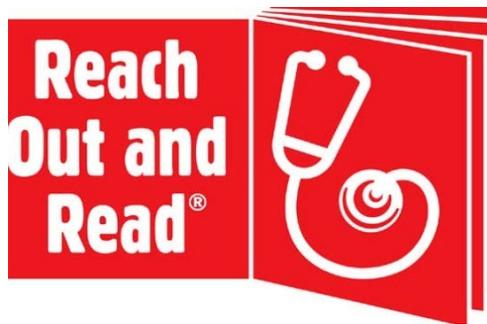


**"WORDS ARE, IN MY NOT SO HUMBLE
OPINION, OUR MOST INEXHAUSTIBLE
SOURCE OF MAGIC, CAPABLE OF BOTH
INFLICTING INJURY AND REMEDYING IT."**

Albus Percival Wulfric Brian Dumbledore



THE VITAL IMPORTANCE OF LANGUAGE



At more than 10 routine health checkups from infancy through 5 years, Reach Out and Read-trained providers:

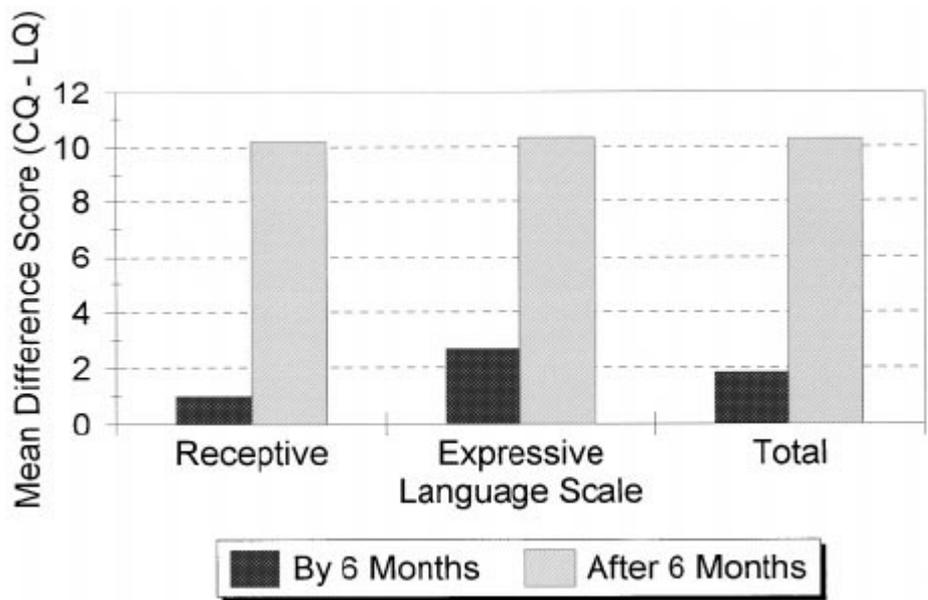


- **Talk with parents** about how important it is to read aloud and engage with their young children
- **Demonstrate** how best to look at books and talk about the stories with their infants, toddlers and preschoolers
- **Encourage them** to cuddle up and read together at home and build routines around books
- And then **give a new book** to the child to take home and keep

Reach Out and Read **doctors** encourage families to **read aloud** together.

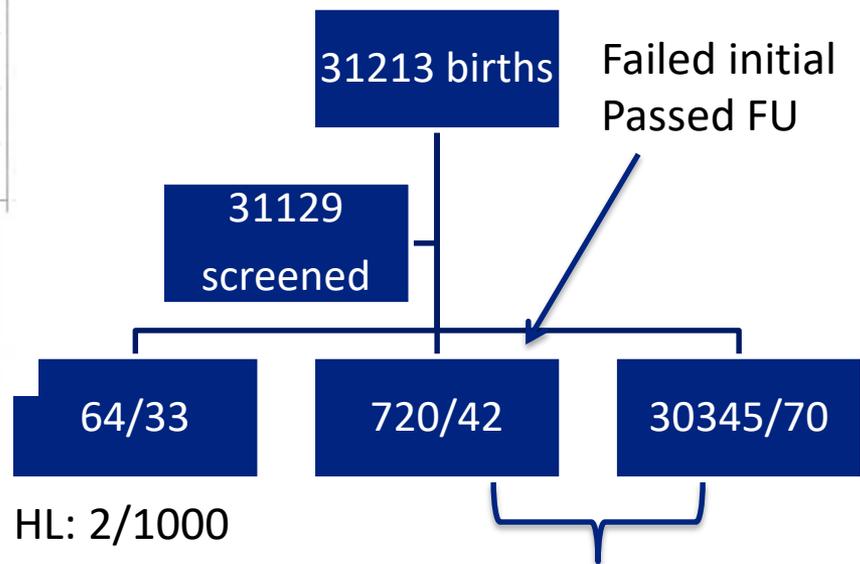
At the end of the program, every child has a home-library of books, each given with the advice to parents that they are their child's first and most important teacher.

THE IMPORTANCE OF EARLY INTERVENTION

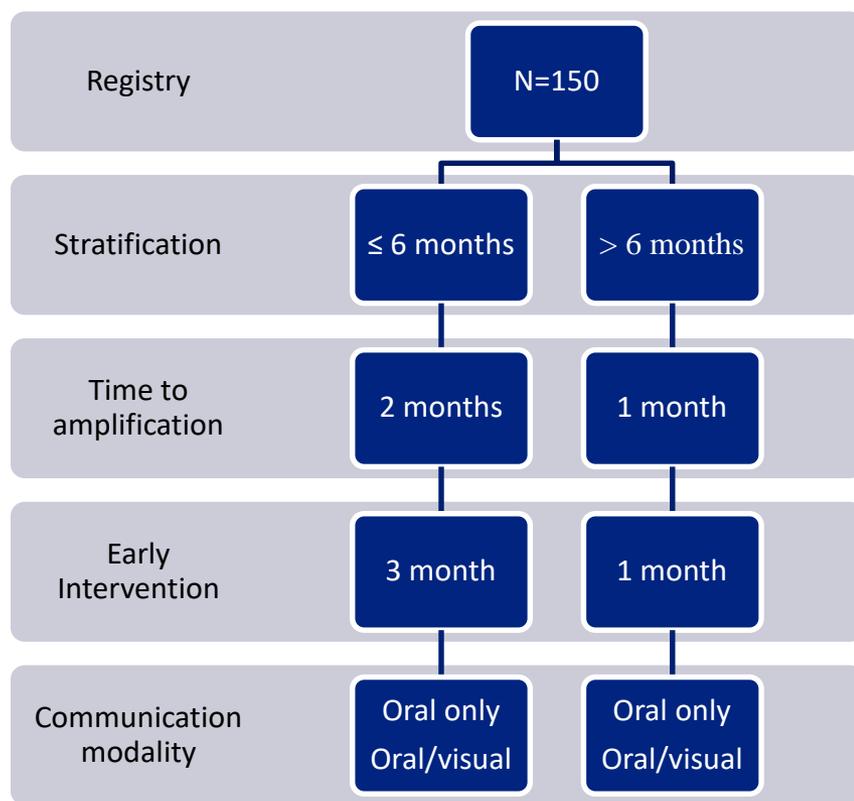


Christine Yoshinaga-Itano, Allison L. Sedey, Diane K. Coulter, Albert L. Mehl
 Pediatrics Nov 1998, 102 (5) 1161-1171; DOI: 10.1542/peds.102.5.116

Rhode Island study 2008



THE IMPORTANCE OF EARLY INTERVENTION



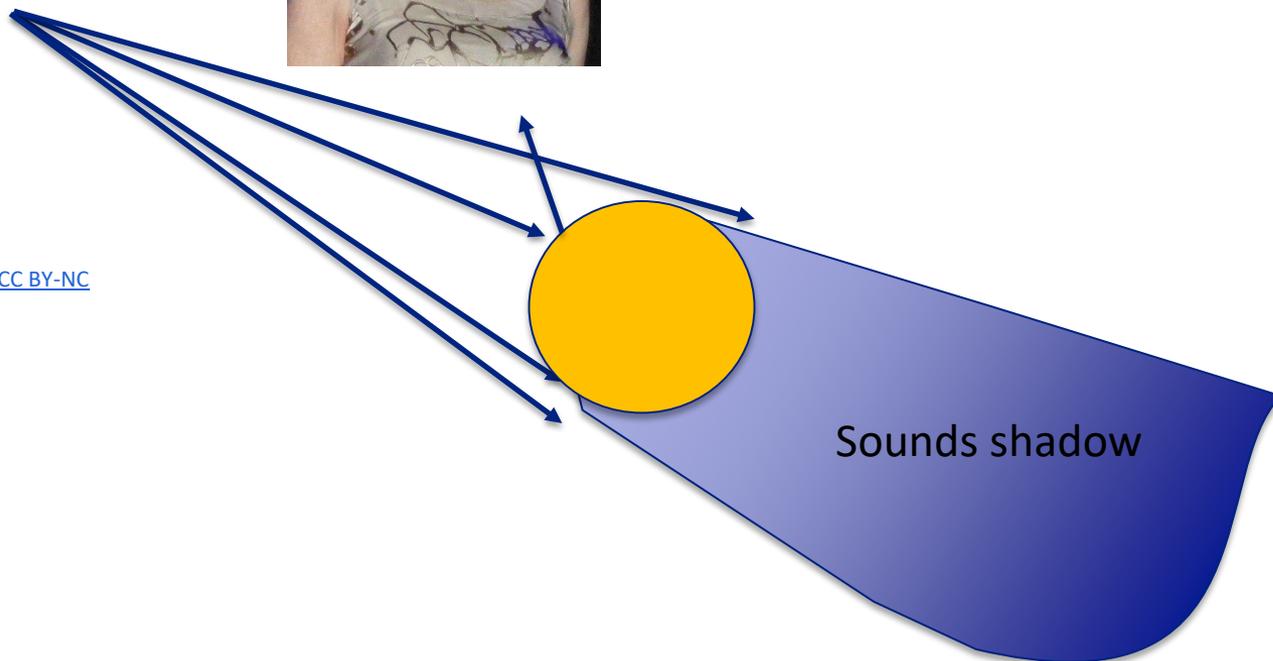
UNILATERAL HEARING LOSS



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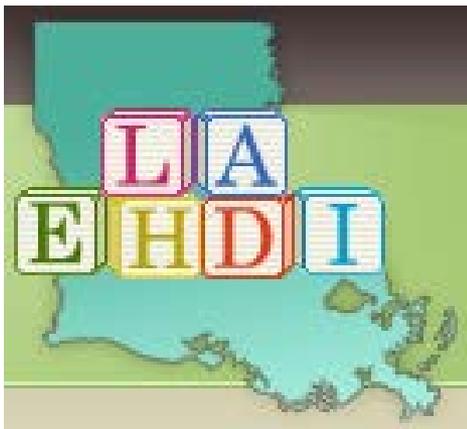


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EHDI WHO?

- Early
- Hearing
- Detection and
- Intervention
- Hearing Screening before 1 month of age
- Diagnostics completed before 3 months of age
- Early Intervention services before 6 months of age



EHDI COLLABORATORS



Parent Pupil Education Program

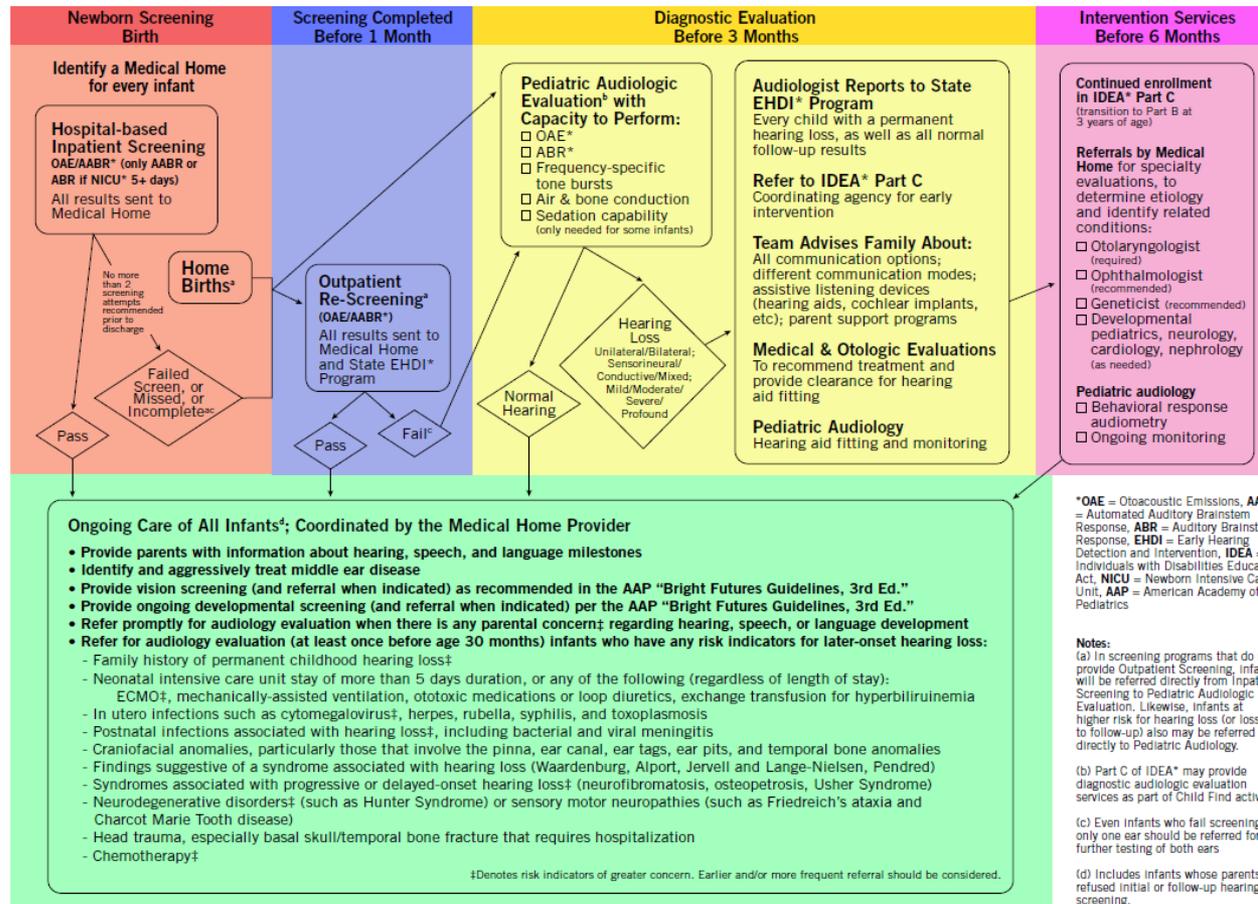
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FOR THE CLINICIAN

Early Hearing Detection and Intervention (EHDI) Guidelines for Pediatric Medical Home Providers



February 2010 - American Academy of Pediatrics Task Force for Improving Newborn Hearing Screening, Diagnosis and Intervention (www.medicalhomeinfo.org)

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YOUR BABY NEEDS A FOLLOW-UP HEARING SCREENING

What Families Need to Know

Communication is Key!

A hearing screening is a test that checks how much and what your baby is hearing. There are many reasons why your baby may need another hearing screening. The most common are:

- There was noise in the room
- Debris in the ear from delivery
- Baby was moving a lot
- Baby has hearing loss

Regardless of the reason, it is important to get another screening as soon as possible. Identifying how your baby hears early is the best way to help them stay on track with their language development. Children who are deaf or hard of hearing need support services as early as possible (no later than 6 months old, but earlier is better) in order to develop communication and language skills similar to their peers.

THE HEARING SCREENING PROCESS



BEFORE THE SCREENING

It is best to do the hearing screening when a baby is sleeping. To help prepare your baby, try not to let them nap before the appointment, and be prepared to feed them just before the screening begins to help them fall asleep.



DURING THE SCREENING

The rescreening will be similar to the first screening your baby had when they were first born. Your baby will be able to sleep through the screening and will not experience any pain or discomfort. Their hearing will be measured using one of two tests, the Otoacoustic Emissions (OAE) or the Auditory Brainstem Responses (ABR).



AFTER THE SCREENING

After the screening is complete, you will receive the results right away. It is important to share these results with your child's pediatrician at their next visit.

THE RESULTS



If your baby **NEEDS FURTHER TESTING**, an appointment will be scheduled, or you will receive a referral, to see an audiologist for diagnostic testing.



If your baby has a **PASS** result, no further testing is needed right now. It is important to pay attention to your baby's development and alert your doctor if you are worried.



If your baby is diagnosed as deaf or hard of hearing, the Parent Pupil Education Program (PPEP), Hands and Voices, EarlySteps, and other organizations will reach out to you to provide guidance and support.



HAVE MORE QUESTIONS ABOUT HEARING SCREENING?

Contact the Early Hearing Detection and Intervention (EHDI) program at 504-599-1086 or email us at laehdi@la.gov. For more information, visit us online at ldh.la.gov/ehdi.



June 2019

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What Families Need to Know

Early Communication is Key

ALL NEWBORN BABIES NEED TO GET A HEARING SCREENING BEFORE THEY LEAVE THE HOSPITAL

- It is important to figure out how much and what your baby's hearing so that you can find the best way to communicate with them. Typically, babies learn language by listening to those around them. Babies who are deaf or hard of hearing may need to learn different ways of communicating, such as sign language.
- About 100 babies in Louisiana are identified as deaf or hard of hearing each year. The only way to find out early is through newborn hearing screening.



HEARING SCREENING IS IMPORTANT FOR LANGUAGE DEVELOPMENT



- Language is how your baby learns. Communication and language development begin at birth. Babies use sounds and movements to communicate before one year of age, regardless of how they hear.
- Find out early if your baby has hearing loss to help them learn, grow, and thrive. Children who are deaf or hard of hearing need to get support services as early as possible (no later than 6 months of age) in order to develop communication and language similar to their peers.

SOME BABIES NEED FOLLOW-UP TESTING

The results of your baby's hearing screening are on the back of this page. Look to see if "Further Testing Needed" is checked and if there was a follow-up hearing testing appointment scheduled. If a follow-up appointment has not been scheduled, talk to your baby's doctor about scheduling one as soon as possible.

- Some babies need more testing to find out if they have hearing loss. An appointment should be made as soon as possible.
- Some babies only need follow-up testing in one ear. Even babies who have hearing loss in only one ear need support services to help keep their language development on track.



If your baby is diagnosed as deaf or hard of hearing, the Parent Pupil Education Program (PPEP), Hands and Voices, EarlySteps, and other organizations will reach out to you to provide guidance and support.



HAVE MORE QUESTIONS ABOUT HEARING SCREENING?

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June 2019



YOUR BABY HAS BEEN DIAGNOSED AS DEAF OR HARD OF HEARING

What Families Need to Know

Communication is Key

Your child has been diagnosed as deaf or hard of hearing. You may feel overwhelmed or scared right now, but you're not alone. The Louisiana Early Hearing Detection and Intervention (EHDI) program is here to help guide you through this process and let you know what's to come.

EHDI will link you to providers that will help create a plan for your family. This group of providers will be your early intervention team. The partnership between you and your team will focus on meeting everyone in your family's needs (siblings, grandparents, etc.) so that your baby can communicate and bond with as many people as possible. The plan will include services and resources that will help your baby learn language and communication skills to keep their development on track.

It's Important to Act Fast!

The first 3 years of life are the most important for learning how to communicate. Your child's brain is 50% developed by age 1, and 80% developed by age 3. Children use sights and sounds to learn language and communication skills. Deaf and hard of hearing babies may need extra help with this. If children don't begin to develop language skills during this period, it will be much harder for them to learn. The sooner a deaf or hard of hearing child starts early intervention, the better their language and communication skills can be. They should be enrolled in services as soon as possible (within 1 month of diagnosis). The decisions you make may change as your child grows, so choose what you think is best for your child now.

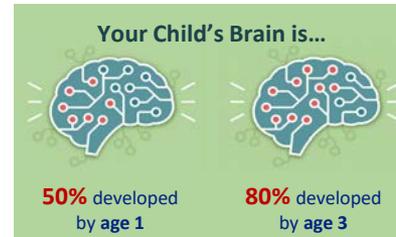


Image from Iowa Early Hearing Detection and Intervention

Understand Your Communication Options

There are many options when it comes to communication choices for your child. These can be combined or changed as you learn more about what works best for your family. Here are a few to think about:



- **Listening and Spoken Language (LSL):** teaches a child spoken language through listening using hearing devices and special instruction
- **American Sign Language (ASL):** a formal system of sign language used in the US
- **Cued Speech:** uses handshapes, placement of hands, and lip reading to visually show the different sounds of spoken language
- **Total Communication:** a combination of communications styles such as spoken language, signed language, and lip reading

Hearing Devices

- **Hearing Aid:** a small device that goes in or behind the ear to make sounds louder
- **Cochlear Implant:** devices that provide sound for those who don't benefit from a hearing aid
- **Bone Conduction Hearing Aid:** a device that makes sounds louder through bone vibration
- **FM System:** a device that makes a speaker's voice louder and helps block out background noise



It's Okay to Make Changes

What works for your child today may not work tomorrow. Work with your early intervention team to figure out what's best for your child as they grow. Don't be afraid to try other communication options to keep your baby on track.

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Learn With Your Child

Babies learn from the people they spend the most time with. What your deaf or hard of hearing baby learns will be very similar to what a hearing baby learns. You may need to learn a signing system or create pictures with your child as they learn new words. Remember that you are your child's first and most important teacher.

Want to learn American Sign Language (ASL)?

Parents of children 3 and under who are deaf or hard of hearing can use the *Sign It* online curriculum to learn ASL free of charge! Go to infanthearing.org/SignIt to sign-up and start learning.

What's Next?

Following your child's diagnosis, different programs will reach out to offer support and guidance. These programs will be your early intervention team. They are here to help provide services, create a plan of action, and offer emotional support.

Within the 1st week of learning your child's diagnosis, you'll hear from:

Parent Pupil Education Program (PPEP)

lalds.org/outreach | 337-581-6389

PPEP will be your first point of contact for early intervention. Their staff works with families of babies and children with hearing loss. They provide guidance and support on communication and language development.

Hands and Voices Guide by Your Side (GBYS)

LAHandsandVoices.org/guide-by-your-side | 337-515-5774

GBYS will provide family-to-family support from a trained parent of a deaf or hard of hearing child. Your Guide is there to provide emotional support and share their experiences about the challenges and joys of raising a child who is deaf or hard of hearing.

Within the 3rd week of learning your child's diagnosis, you'll hear from:

EarlySteps

ldh.la.gov/EarlySteps | 225-342-0095

EarlySteps will help you decide what type of services your child needs and link you with providers who will help your child learn new language and communication skills. They provide services such as speech therapy, special instruction, and translation services to families with children less than 3 years old.

Learn More!

Continue to learn and seek out resources so you can make the best decisions for your family. Your decisions may change as you learn new information, and your child may need new tools and services as they progress. Topics to look into include types of hearing loss, types of hearing devices, communication options, and language development.

- Baby Hearing | BabyHearing.org
- Supporting Success for Children with Hearing Loss | SuccessForKidsWithHearingLoss.com
- American Society for Deaf Children | DeafChildren.org



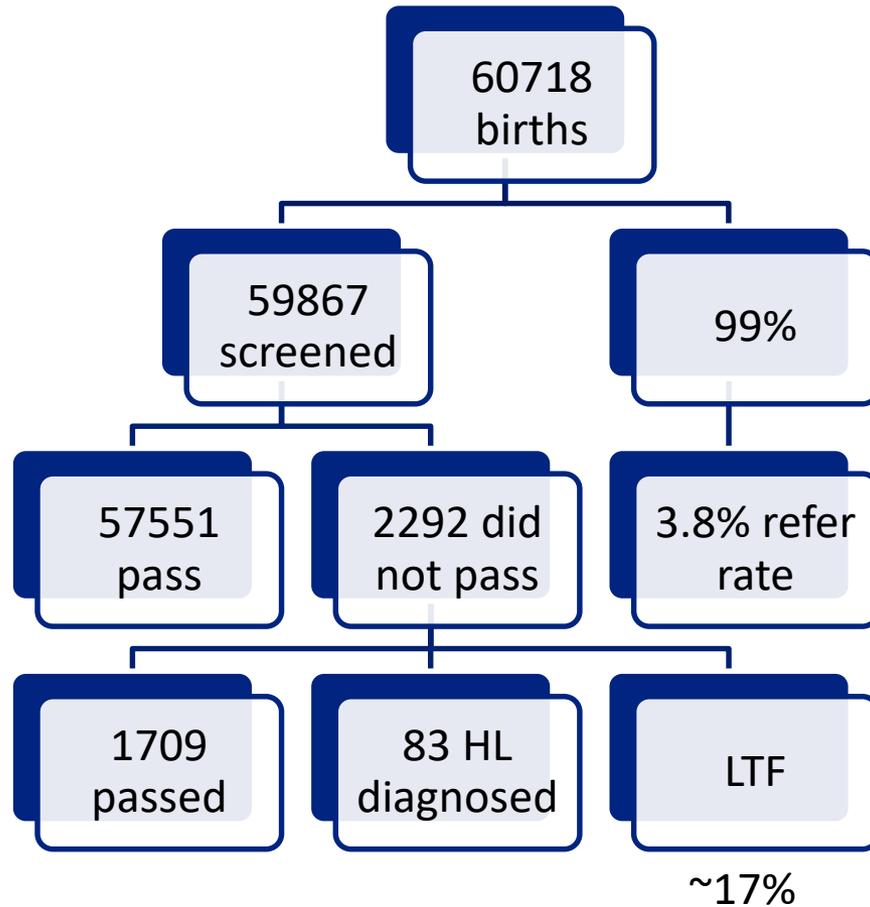
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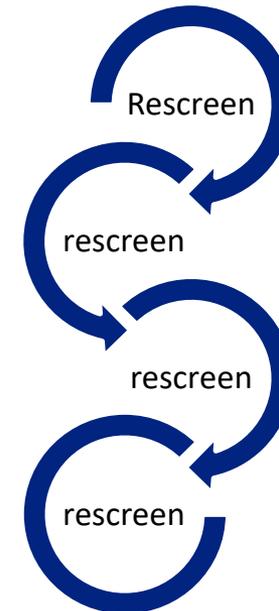
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THE EHDI PROCESS



Stop the endless cycle of rescreens!



“IN PROCESS OF EVALUATION” STATISTICS CONT.: TRANSIENT CONDUCTIVE HEARING LOSS

	Jan-Jun, 2018	Jul-Dec, 2018	Jan-Mar, 2019
# dx transient conductive	17	25	9
Unilateral mild	5	5	3
Unilateral moderate	4	3	2
Unilateral undetermined	0	1	0
Bilateral mild	5	14	0
Bilateral moderate	3	2	4

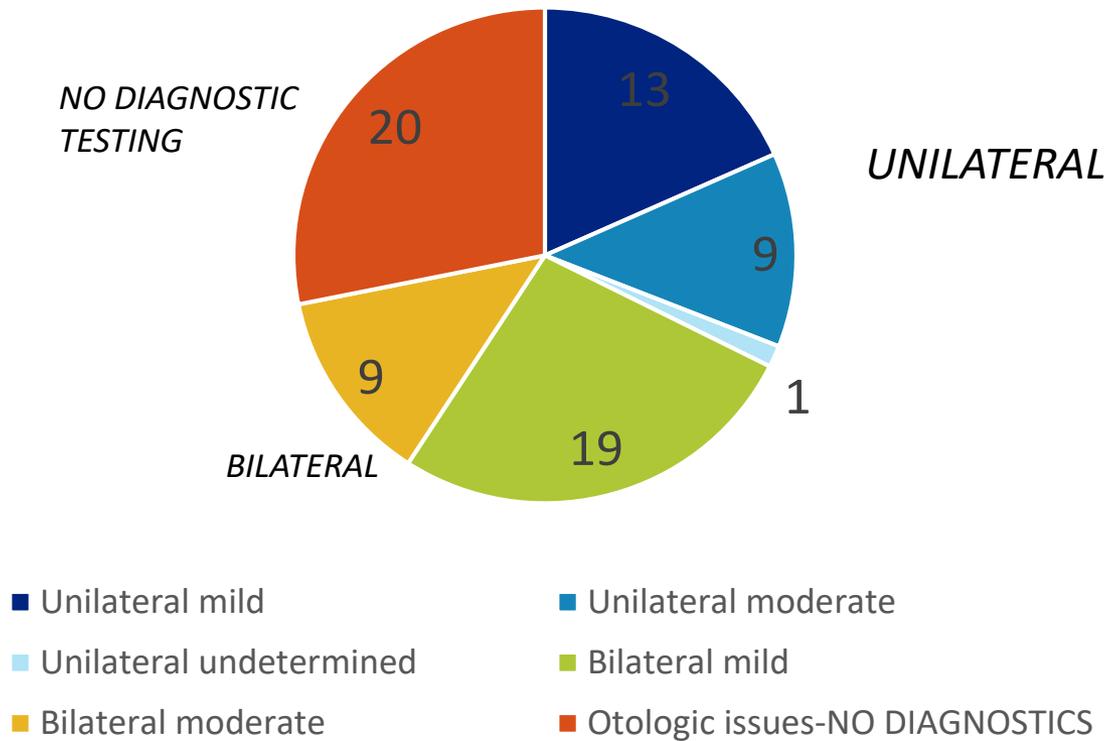
Slide courtesy Danielle Mercer, LA EHDI
System Development Coordinator

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Jan 2018-Mar 2019 In Process Otologic Referral Breakdown n=71

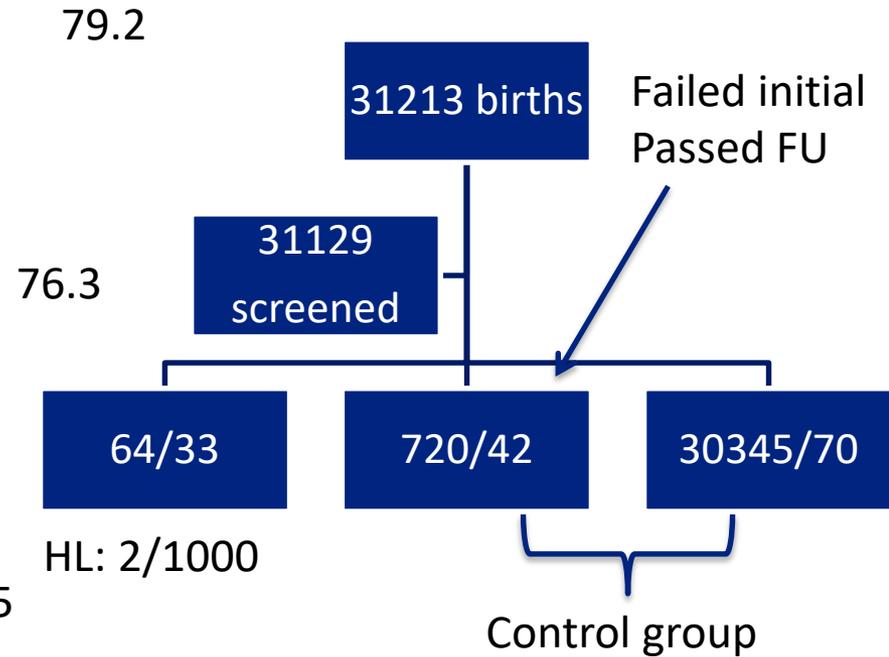
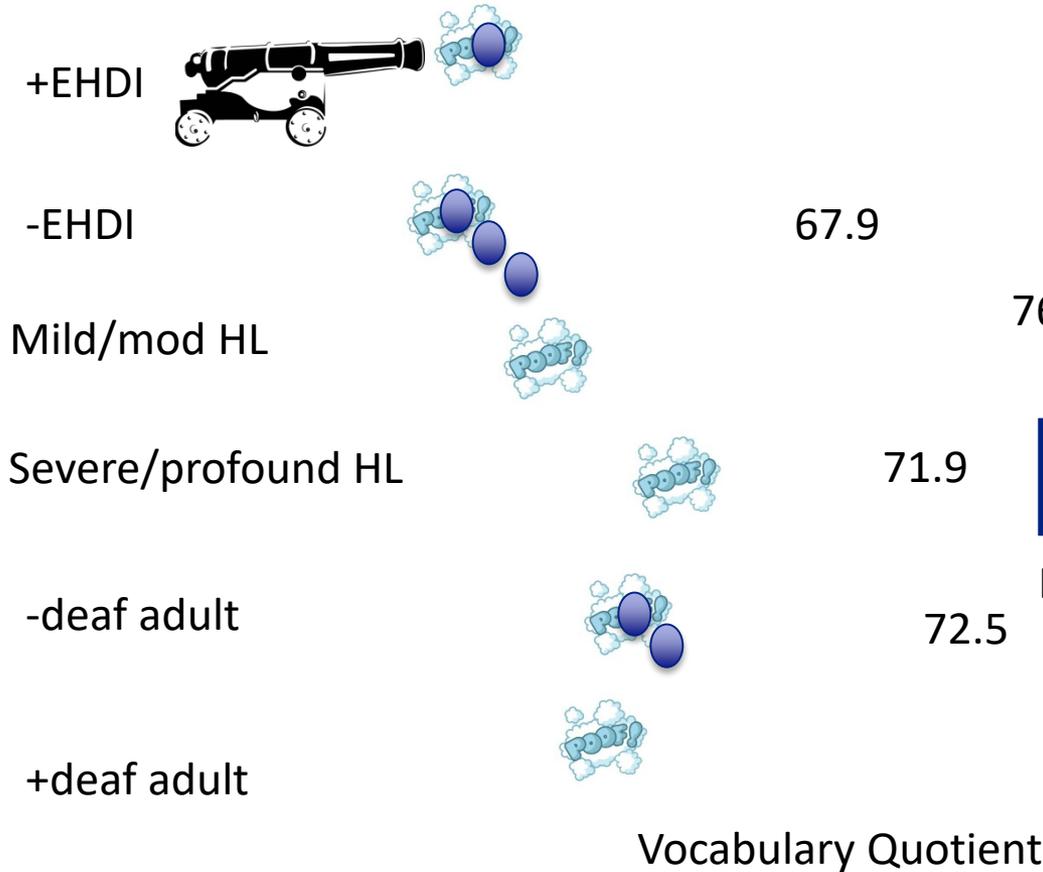


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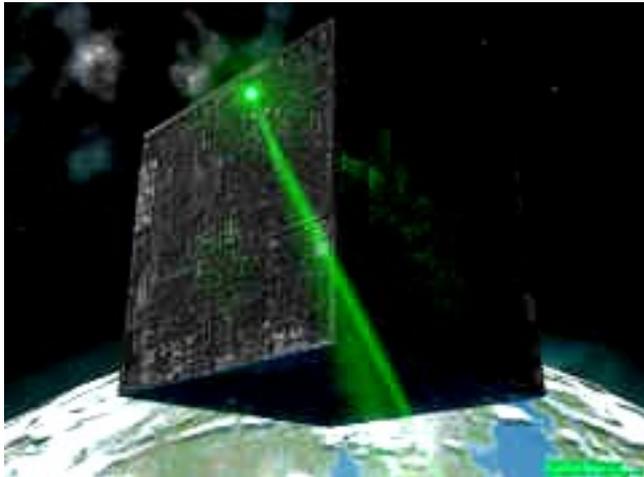


MORE?

Rhode Island study 2008



MODALITY IS IRRELEVANT



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And Resistance is Futile



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MISCONCEPTIONS

~~American Sign Language is not actually a Language~~

~~Signing interferes with spoken language development~~

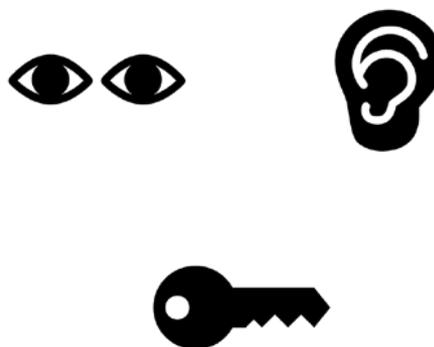
~~My patient is not deaf they have a Cochlear Implant~~



WHAT DOES THE DATA TELL US



under



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POINT COUNTERPOINT

Pros

- amplification and technology such as CI restore a great deal of hearing.
- the family just wants the child to be like them. There is nothing wrong with that.

Cons

- remember when the devices are off, at the end of the day, it is still a deaf/hh child.
- that is true but let's look at it from another perspective - say you are deaf. Wouldn't you want your child to be able to communicate with you just like you do?



IMPLICIT BIAS



<https://implicit.harvard.edu/implicit/takeatest.html>

Do

- Children who are deaf
- Use a certified ASL translator
- Talk to the person not the translator

Do not

- Not deaf children
- Assume all deaf people can read lips
- Look at the translator and ask that person to ask the deaf person . . .



CLINICAL PEARLS

- Focus on language
- Remember:
 - Accessible
 - Interactive
 - Abundant
- Do not blame all failed newborn hearing screenings on fluid in the ear
- The earlier the intervention the better

Modality is not relevant



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Thank You

