

High Tech Toys Aid Cochlear Implant User



“People with hearing disabilities don’t realize the many possibilities that are available with assistive technology. I’m lucky that my interests are fairly technical and I like gadgets.”

In addition to his legal career, photography is Paul’s second major interest. He believes that his hearing loss may have led to an increase in his visual abilities.

Paul M. Lurie was a successful lawyer in mid-career when a combination of medical problems led to the replacement of his biological hearing mechanism with a “bionic” system at the House Clinic.

During an examination in 1996 for an undiagnosed hearing problem in Paul’s left ear, doctors discovered a meningioma (a benign tumor of the brain covering) on his right side, which required removal. He was informed in advance that removal of the tumor would most likely result in loss of hearing in his “good” right ear. This presented Paul with a dilemma. “I had to do something,” Paul said. “Being able to hear and talk is essential to my profession. As a partner in a large, Chicago-based law firm, I work as an arbitrator and mediator, and I frequently speak at national conferences on the construction industry,” Paul stated.

Working with Dr. Derald Brackmann, Paul’s solution was a “prophylactic” cochlear implant in his left ear. Replacing even very poor natural hearing with an artificial device is seldom done. In addition, Paul’s cochlear implant choice was the Cochlear Freedom N24 processor, which, at that time, was still considered experimental by the FDA. Doctors at House Clinic convinced the FDA that in Paul’s case, an early implant with the N24 system was the best plan, so

that if he lost his biological hearing, the cochlear implant would be there to replace it. As anticipated, the surgery did compromise the hearing nerve on the right. However, with his implant in place, Paul was able to leave the House Clinic with his bionic hearing functioning. He never lost the ability to hear. Today, most people consider him to be someone with only mild hearing loss.

“Thanks to Dr. Brackmann and audiologist Dawna Mills, I was well taken care of at House. But when I went home, I had to figure out the rest of it for myself,”



High Tech Toys Aid Cochlear Implant User



“People with hearing disabilities don’t realize the many possibilities that are available with assistive technology. I’m lucky that my interests are fairly technical and I like gadgets.”

In addition to his legal career, photography is Paul’s second major interest. He believes that his hearing loss may have led to an increase in his visual abilities.

Paul M. Lurie was a successful lawyer in mid-career when a combination of medical problems led to the replacement of his biological hearing mechanism with a “bionic” system at the House Clinic.

During an examination in 1996 for an undiagnosed hearing problem in Paul’s left ear, doctors discovered a meningioma (a benign tumor of the brain covering) on his right side, which required removal. He was informed in advance that removal of the tumor would most likely result in loss of hearing in his “good” right ear. This presented Paul with a dilemma. “I had to do something,” Paul said. “Being able to hear and talk is essential to my profession. As a partner in a large, Chicago-based law firm, I work as an arbitrator and mediator, and I frequently speak at national conferences on the construction industry,” Paul stated.

Working with Dr. Derald Brackmann, Paul’s solution was a “prophylactic” cochlear implant in his left ear. Replacing even very poor natural hearing with an artificial device is seldom done. In addition, Paul’s cochlear implant choice was the Cochlear Freedom N24 processor, which, at that time, was still considered experimental by the FDA. Doctors at House Clinic convinced the FDA that in Paul’s case, an early implant with the N24 system was the best plan, so

that if he lost his biological hearing, the cochlear implant would be there to replace it. As anticipated, the surgery did compromise the hearing nerve on the right. However, with his implant in place, Paul was able to leave the House Clinic with his bionic hearing functioning. He never lost the ability to hear. Today, most people consider him to be someone with only mild hearing loss.

“Thanks to Dr. Brackmann and audiologist Dawna Mills, I was well taken care of at House. But when I went home, I had to figure out the rest of it for myself,”



“Thanks to Dr. Brackmann and audiologist Dawna Mills, I was well taken care of at House. But when I went home, I had to figure out the rest of it for myself.”

Paul stated. “In Chicago, in 1997 there were few resources for someone who wanted to aggressively resume a high powered business life with a new bionic hearing system,” he continued.

Environmental noise that overwhelms speech content (expressed as the “signal-to-noise ratio”) is the problem faced by everyone with a hearing deficit, both in meetings and on telephones. Paul has learned methods of improving the signal-to-noise ratio that inputs to his cochlear implant. “I found that the products marketed to consumers through normal channels were limited in their capabilities. Often they were directed toward stay-at-home grandparents and not designed for the business person,” he indicated.

Paul hired a sound engineer who worked for a major audiovisual company that designed sound systems.

His consultant had little experience with the hearing impaired, but was interested in the problem as a technical matter. Together they looked at the products available in the commercial sound equipment market. Paul discovered that there were many products that improved his hearing by reducing the signal-to-noise ratio using microphones that utilize the t-coil function on his cochlear implant.

“People with hearing disabilities don’t realize the many possibilities that are available with assistive technology. I’m lucky that my interests are fairly technical and I like gadgets. My wife kids me that if anyone had to have something like this happen, I was a

good choice, because it gave me the opportunity to play with more toys,” Paul added. “While I use this technology with a cochlear implant, it could also be used by persons who have aided or unaided hearing deficits.”

In addition to his legal career, photography is Paul’s second major interest. He believes that his hearing loss may have led to an increase in his visual abilities. His photography is very popular in medical facilities, where they visually help to reduce stress. His images are vivid landscapes that evoke the tranquility of rural life. His works are owned by the Eisenhower Hospital in Rancho Mirage, California, St. Luke’s Roosevelt Medical Center in New York City and the Family Institute at Northwestern University in Evanston, Illinois.

The analogy between a photograph and a cochlear implant is appropriate. A cochlear implant doesn’t provide the brain with the same quantity of information that a person with normal hearing receives, but the brain is able to interpret the reduced amount of information into a useful and natural hearing experience. Likewise, photographs capture a small percentage of what the eye sees, yet the brain is able to translate that information into what is perceived as art. “Translating information into experiences – that’s really what I’m all about and that is



what the House Clinic has done for my hearing sense,” Paul stated.

Paul’s advice to other people with hearing problems:

“Many people withdraw from business activities when they lose their hearing. If they are dependent on normal hearing for their entertainment, they also stop going to movies, concerts and plays. In my business world, I learned to use equipment and strategies that allow me to communicate as a normal person with an occasional ‘Could you repeat that?’ For entertainment I use my assistive devices, but I also have become more interested in visual entertainment, such as fine art photography, where my hearing impairment is irrelevant.

As a result of my re-evaluation and implementation of my strengths, I am much more successful in my law practice today than I was before I lost my natural hearing. I also have found that my discovery of my latent talent in photography has resulted in national recognition and a very satisfying sense of worth. Hearing loss only changes one’s choices, it doesn’t limit one’s potential for success and enjoyment.” ❖



“Translating information into experiences – that’s really what I’m all about and that is what the House Clinic has done for my hearing sense.”

Paul M. Lurie is on the boards of the Hearing Loss Association of America and the Foundation for Hearing and Speech Rehabilitation.

Initially Paul used high-end microphones and portable mixers that output into his Phonak FM system. He learned how to take sound from audio mixing boards in conference facilities and direct it to his FM system. Recently, he has abandoned wired microphones in favor of wireless models. His

current Revolabs system allows him to have eight miniature wireless microphones placed around large conference tables that input into his FM system. This is connected via telecoil to his cochlear implant. He also uses the new Phonak Inspiro system that allows six people to talk simultaneously into wearable

wireless microphones that transmit directly to his Phonak t-coil MyLink FM system, which he wears under his shirt. Paul says that these portable FM microphones are also great for noisy restaurants – “the Achilles heel for anyone with hearing loss.”