

100-100-11-1000

BOSTON GUILD FOR THE

HARD OF HEARING

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From

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AS YOU KNOW, I CAME TO THE POSITION OF SURGEON GENERAL IN
WASHINGTON ABOUT 8 YEARS AGO, FRESH FROM A LONG CAREER AS A
PEDIATRIC SURGEON. FOR NEARLY 40 YEARS I LOOKED AT MEDICAL
PROBLEMS AND TRIED TO SOLVE THEM WITH THE SKILLS IN MY OWN TWO
HANDS.

AND I SUSPECT THAT, SUBCONSCIOUSLY, I THOUGHT THAT WAS WHAT
HEALTH CARE AND MEDICAL CARE WERE ALL ABOUT. MOST PHYSICIANS
HAVE THAT QUITE NATURAL BIAS, THAT HEALTH CARE IS THE SUM TOTAL
OF THE PATCHING UP THEY DO FOR THEIR PATIENTS.

AND, TO A CERTAIN EXTENT, I GUESS IT IS.

BUT NOT ALTOGETHER. AND LESS SO IN THE FUTURE.

AND THAT'S ONE OF THE MAIN LESSONS I LEARNED, DURING MY TWO TERMS
AS YOUR SURGEON GENERAL.

VIRTUALLY EVERY MAJOR HEALTH ISSUE I HAD TO DEAL WITH AS SURGEON
GENERAL HAS HAD -- AT ITS VERY HEART -- THE WAY PEOPLE BEHAVE ...
THE WAY THEY BEHAVE TOWARD THEMSELVES ... THE WAY THEY BEHAVE
TOWARD OTHERS THEY KNOW AND LOVE ... AND THE WAY THEY BEHAVE
TOWARD OTHERS THEY DON'T KNOW AT ALL.

SHALL I LIST SOME OF THOSE ISSUES? I'LL NAME JUST A HANDFUL:

SMOKING ... THE ABUSE OF ALCOHOL ... UNWANTED PREGNANCIES...

CHILD ABUSE AND OTHER FORMS OF FAMILY VIOLENCE ...

AND INFECTIOUS DISEASES SUCH AS HEPATITIS B ...

AND, COURSE, AIDS.

I'LL STOP RIGHT THERE, ALTHOUGH THE FULL LIST IS A GOOD DEAL

LONGER.

BUT AT THE BASE OF EACH OF THOSE PAINFUL, TRAGIC, DESTRUCTIVE,
AND PREVENTABLE HEALTH PROBLEMS IS AN EQUALLY TRAGIC AND
DESTRUCTIVE HUMAN BEHAVIOR.

THIS IS NOT AN EASY SUBJECT TO DISCUSS IN A DEMOCRACY, BECAUSE WE
PRIDE OURSELVES ON LETTING THE INDIVIDUAL MAKE THE DECISION AS TO
WHAT HE OR SHE WANTS OUT OF LIFE.

AND THE REST OF US HAVE AGREED -- SO FAR, ANYWAY -- THAT WE WILL
PAY ALMOST ANY PRICE TO KEEP THAT PART OF OUR SOCIAL COMPACT
ALIVE AND WELL.

HENCE, WE PUT A GREAT DEAL OF HUMAN AND MATERIAL RESOURCES INTO
VACCINE RESEARCH AND DELIVERY ... INTO DRUG DEVELOPMENT ... INTO
PHYSICAL AND MENTAL HEALTH THERAPIES OF EVERY KIND ... INTO THOSE
KINDS OF MEDICAL AND PUBLIC HEALTH RESPONSES THAT ARE AFTER THE
FACT.

AND WE TURN TO LARGE, BROAD-BRUSH KINDS OF PUBLIC EDUCATION
PROGRAMS TO DO THE TOUGH, LONG-TERM JOB OF CORRECTING HAZARDOUS,
HIGH-RISK HUMAN BEHAVIOR. ALSO AFTER THE FACT.

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WHEN YOU THINK OF AIDS AND HEPATITIS

YOU CAN SEE

FOR EXAMPLE, I THINK THERE'S A DIRECT, STRAIGHT-LINE RELATIONSHIP BETWEEN THE 1960s, WHEN MANY CONSTRAINTS DISAPPEARED, CONCERNING EXPERIMENTATION WITH DRUGS AND SEXUALITY ... AND THE 1970s, WHEN SUCH EXPERIMENTATION BECAME RATHER WIDESPREAD AMONG YOUNG PEOPLE IN OUR SOCIETY ... AND THE 1980s, WHEN THE TRAGIC RESULTS OF MUCH OF THAT BEHAVIOR CAN BE MORE CLEARLY SEEN.

AND SO WE'VE BEEN BUSY THE PAST FEW YEARS POSTING THE WEEKLY
TALLIES OF DRUG OVERDOSE DEATHS ... OF "CHILDREN HAVING CHILDREN"
... OF VICTIMS OF A NEW EPIDEMIC OF SYPHILIS ... OF THE
ESCALATING NUMBERS OF PEOPLE WITH RESISTANT STRAINS OF GONORRHEA
... AND OF THE EXPANDING CASELOAD OF PEOPLE WHO WERE INCUBATING
THE AIDS VIRUS UNTIL THE "RIGHT" OPPORTUNISTIC DISEASE CAME
ALONG.

IN MANY AREAS OF MEDICINE AND PUBLIC HEALTH, WE'RE MAKING

EXCELLENT PROGRESS:

HYPERTENSION SCREENING, ORGAN TRANSPLANTATION, CANCER DETECTION

AND CONTROL, AND SO ON.

BUT IN MANY OTHER AREAS, WE SEEM TO BE RUNNING IN PLACE, IF NOT ACTUALLY FALLING BEHIND. THE STATISTICS ARE NOT GOOD. FAR TOO MANY PEOPLE IN OUR SOCIETY HAVE FALLEN VICTIM TO DEBILITATING AND DEADLY DISEASE. AND WE SUSPECT THAT THE WORST NUMBERS MAY NOT BE IN YESTERDAY'S FILES. RATHER, THEY MAY SHOW UP IN THE TALLY SHEETS OF TOMORROW AND THE DAY AFTER.

I'D LIKE TO ADDRESS 3 BEHAVIORAL CHANGES IN REFERENCE TO HEARING. A MOMENT AGO I MENTIONED 3 BEHAVIOR PATTERNS THAT CERTAINLY REFER TO HEARING.

- THE WAY PEOPLE BEHAVE TOWARDS THEMSELVES
- THE WAY THEY BEHAVE TOWARD OTHERS THEY KNOW AND LOVE
- THE WAY THEY BEHAVE TOWARD OTHERS THEY DON'T KNOW AT ALL.

FIRST - BEHAVIOR TOWARD ONESELF

NORMAL HEARING

~~B~~ MANY CHILDREN ARE BORN WITHOUT ~~SUCH DISORDERS~~ ... THEY GROW AND BECOME LIVELY ADOLESCENTS ... TAKING PART IN SPORTS AND IN OTHER RECREATIONAL ACTIVITIES OF THEIR GENERATION.

UNFORTUNATELY, ONE OF THOSE ACTIVITIES IS CONTEMPORARY POPULAR MUSIC AND ONE OF THE KEY MEANS OF HAVING ACCESS TO THIS MUSIC IS THE PERSONAL RECORDER WITH HEADPHONES. WE ALREADY KNOW THE TERRIBLE PRICE OF PARTIAL AND TOTAL DEAFNESS PAID BY ROCK AND ROLL MUSICIANS, ESPECIALLY DRUMMERS.

NOW WE'RE BEGINNING TO UNDERSTAND THAT THE SAME PRICE IS BEING PAID BY THOSE WHO LISTEN TO THOSE MUSICIANS ON TAPE, WITH THE VOLUME TURNED UP SO HIGH THAT THE DECIBEL LEVEL ACTUALLY MIGHT EXCEED WHAT IT WOULD HAVE BEEN, HAD THE MUSIC BEEN HEARD "LIVE."

~~AND JUST THE OTHER DAY I READ ABOUT THE LATEST SOUND~~
~~TO~~
"CRAZE," ~~WHICH~~ IS PUT UP TO 8 MEGAWATT SPEAKERS INSIDE THE CLOSED ENVIRONMENT OF ONE'S AUTOMOBILE ... AND PLAY ROCK MUSIC ON SUCH A SYSTEM AT TOP VOLUME.

I BELIEVE THAT QUALIFIES AS BEING A "PUBLIC NUISANCE" AND OUGHT TO BE STOPPED ON THOSE GROUNDS ALONE. I HOPE SUCH CASES GET INTO THE COURTS AND THAT THE REST OF US ON PUBLIC STREETS AND HIGHWAYS CAN BE PROTECTED FROM SUCH ASSAULTS OF HIGH-VOLUME SOUND.

FRANKLY, I SEE NO DIFFERENCE BETWEEN THE SOUND POLLUTION GENERATED BY PEOPLE DRIVING CARS AND THE AIR POLLUTION GENERATED BY PEOPLE SMOKING CIGARETTES. BOTH KINDS OF POLLUTION ARE HARMFUL TO HUMAN HEALTH.

IT IS NO EASY TASK BUT WE
HAVE GOT TO CHANGE THE BEHAVIOR
OF ADOLESCENTS AND DO IT IN AN
ERA WHEN MOST OF US HAVE
CONCLUDED THAT TEEN AGERS DON'T
CHANGE THEIR BEHAVIOR BECAUSE OF
FEAR OF THE CONSEQUENCES OF
THAT BEHAVIOR. HOW WE DO THIS REMAINS TO BE
SEEN.

THEN THERE'S BEHAVIOR TOWARD
THOSE WE LOVE. JUST THINK
HOW MANY ELDERLY PEOPLE LIVE
TOGETHER + CANT COMMUNICATE

OR DO SO POORLY BECAUSE ONE OR
BOTH ARE HEARING IMPAIRED →

AFTER I'D BEEN IN WASHINGTON FOR
SEVERAL YEARS, I WAS BEGINNING TO
FEEL MORE COMFORTABLE WITH THE JOB
BEGAN TO LIKE MORE PEOPLE IN THE
CONGRESS, AND ACTUALLY ENJOYED
COMMITTEE MEETINGS AT THE WHITE
HOUSE.

SUDDENLY I REALIZED WHY - I WAS
LOSING MY HEARING.

SERIOUSLY, THOUGHT

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I REALIZED I WAS MISSING A LOT
AND MAKING INAPPROPRIATE
RESPONSES.

SO I GOT TWO HEARING AIDS.

GETTING A HEARING AID SHOULD

BE JUST LIKE GETTING EYEGLASSES.

WE HAVE TO CHANGE THE BEHAVIOR

OF OLDER PEOPLE ABOUT WEARING

HEARING AIDS - BUT WE HAVE

TO KEEP IT HAMMERING AWAY

AT AGE PREJUDICE - A BEHAVIOR

TOWARD OTHERS WE DON'T KNOW

AT ALL.

~~AFTER A FEW MINUTES, MY STAFF SAW THAT I WAS IN THE PICTURE~~
~~ALSO AND ONE OF THEM SAID, "DR. KOOP, THAT'S A VERY GOOD PICTURE~~
~~OF YOU."~~ I MAKE AS MANY STATEMENTS ABOUT MY
 HEARING AIDS AS I CAN. I LIKE TO CHANGE
 BATTERIES IN PUBLIC PLACES.

~~BUT I HAVE TO DISAGREE BECAUSE~~ MY OWN HEARING AIDS ARE NOT
 EASY TO SEE AND, TO BE HONEST ABOUT IT, I FEEL VERY COMFORTABLE
 WITH THEM ... THEY WORK JUST FINE ... AND I'D LIKE EVERYONE MY
 AGE -- AND THE DOZEN OR SO PEOPLE WHO ARE OLDER THAN I -- TO KNOW
 THAT.

~~BUT IT'S NOT BECAUSE OF ANY FEELINGS OF BRAGGADO.~~ I'M PROUD
 OF THE FACT THAT, ALTHOUGH I AM HEARING IMPAIRED, I AM STILL
 DOING EXACTLY WHAT I WANT TO DO. IN FACT, IN SOME CASES, BEING
 HEARING IMPAIRED MAY VERY WELL HAVE HELPED.

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ANOTHER BEHAVIOR TOWARD THOSE WE
DON'T KNOW AT ALL IS THE NECESSARY
SCREENING ~~OF CHILDREN~~ AND ASSESSMENT
OF HEARING AND SPEECH DISORDERS
ESPECIALLY SCREENING OF NEWBORNS.

FIRST OF ALL, WE DO NOT YET HAVE THE NATIONAL PROGRAM OF SCREENING AND ASSESSMENT THAT A COUNTRY AS TECHNOLOGICALLY ADVANCED AS OURS OUGHT TO HAVE. FRANKLY, IF IT WERE NOT FOR ~~THE~~ TREMENDOUS VOLUNTEER EFFORTS ~~MAINTAINED A FEW YEARS AGO~~, WE'D BE IN TERRIBLE SHAPE ... WE'D HAVE AN EVEN DIMMER IDEA OF THE SCOPE OF THIS PROBLEM IN AMERICA TODAY. - 24 MILLION

SPEECH AND HEARING DISORDERS -

FOR EXAMPLE, WE HAVE THE TECHNOLOGY TO DO A FAIRLY ACCURATE ASSESSMENT OF HEARING DISORDERS AMONG THE NEWBORN. BUT IN MANY HOSPITALS AND CLINICS -- I MIGHT EVEN SAY IN MOST HOSPITALS AND CLINICS -- THIS TYPE OF ASSESSMENT JUST ISN'T DONE.

BABIES ARE BORN WITH HEARING AND SPEECH DISORDERS ...
DISORDERS WHICH CAN BE RECOGNIZED AND UGHT TO BE RECOGNIZED ...
BUT WHICH ARE NOT RECOGNIZED AT ALL.

PHYSICIANS LEAVE THE JOB TO THE PARENTS ... PARENTS LEAVE IT TO THE SCHOOLS ... AND THE SCHOOLS DO THE BEST THEY CAN, BUT BY THEN IT'S ALREADY VERY LATE FOR MANY CHILDREN WHO'VE HAD TO STRUGGLE TO COMPREHEND THE WORLD AROUND THEM DURING THOSE SIGNIFICANT FIRST YEARS OF THEIR LIVES.

THAT'S NOT FAIR. IT'S NOT FAIR TO THOSE CHILDREN. AND IT'S NOT FAIR TO THEIR PARENTS AND SIBLINGS.

WE NEED TO DO A MUCH BETTER JOB ASSESSING EVERY NEWBORN AMERICAN FOR POSSIBLE SPEECH OR HEARING DISORDERS ... AND THEN SETTING IN MOTION WHATEVER IS NEEDED TO CORRECT OR COMPENSATE FOR THOSE DISORDERS.

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BUT WE'VE COME A LONG WAY
WITH THE EDUCATION OF THE
PUBLIC AND THE HEARING
IMPAIRED. SO THAT TODAY
WE CAN SAY TO THE HEARING
IMPAIRED WHO HAVE TAKEN THEIR
PLACE IN SOCIETY.

YOU MAY BE DEAF - BUT YOU'RE
NOT INVISIBLE

YOU MAY BE HARD OF HEARING
BUT YOU WILL BE HEARD

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ONCE AGAIN - THANK YOU FOR

THE HONOR YOU DO ME TODAY →

AND TO ANY OLDER AMERICANS LISTENING TO ME TODAY -- OR
BARELY LISTENING TO ME TODAY -- I SAY: GET TESTED AND GET A
 HEARING AID, IF YOU NEED IT. I GUARANTEE YOU'LL FEEL MUCH
 YOUNGER AGAIN. I CERTAINLY DO.

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AND NOW, ~~I'VE TAKEN TOO MUCH OF YOUR TIME~~ LET ME CLOSE
~~WITH A WORD OF THANKS FOR THE OPPORTUNITY TO HAVE BEEN OF SOME~~
 WITH A WORD OF THANKS FOR THE OPPORTUNITY TO HAVE BEEN OF SOME
IN THE WORLD OF HEARING DISORDERS
 HELP ~~TO THE WORLD~~ THIS YEAR. IT'S BEEN A VERY REWARDING
 EXPERIENCE ... ONE THAT I KNOW I SHARE WITH ALL OF YOU AND ALL OF
 YOUR COLLEAGUES AROUND THE COUNTRY.

THANK YOU.

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