

Ask The Professionals

If you have any questions these professionals can answer, please write to:

"Ask The Professionals"
c/o The Canadian Champion
875 Main Street E.
Milton, Ontario L9T 3Z3
or Fax to: 878-4943

Halton Hills Speech Centre

Division of M. Karen MacKenzie Steiner Speech Language Pathology Professional Corporation

"Your Caring Partners..."

Northview Centre, 211 Guelph St., Suite 5, Georgetown
(905) 873-8400 • www.haltontspeech.com

Q: My child is having speech and language difficulties and it was suggested to me that I contact a Speech-Language Pathologist. What services does a Speech-Language Pathologist provide?

A: A Speech-Language Pathologist is a professional who is trained to assess and provide intervention to children and adults with speech and language difficulties. A Speech-Language Pathologist provides a wide range of services to assist people in the development of effective communication skills. These services include:

- ✓ helping people with speech sounds (articulation) difficulties;
- ✓ assisting children develop language skills;
- ✓ helping people to improve foreign accent, utilizing the Compton Pronouncing English as a Second Language Program;
- ✓ helping people who stutter (dysfluency) to speak more fluently;
- ✓ helping people with voice disorders to improve their voice;
- ✓ assisting people who have difficulties swallowing as a result of illness or stroke;
- ✓ helping people with aphasia (language impairment as a result of head trauma or stroke);
- ✓ developing augmentative and alternative communication systems for people with severe speech difficulties;
- ✓ consulting with individuals and community groups in ways to prevent speech and language disorders and to enhance communication effectiveness in everyday use.

Speech-Language Pathologists practicing in Ontario are registered with the College of Speech-Language Pathologists and Audiologists of Ontario. Speech-Language Pathologists provide services in many different settings including client homes, schools, hospitals, clinics, nursing homes, preschool programs and private practice.

If you would like further information about a Speech-Language Pathologist or the services that they provide please contact the Halton Hills Speech Centre.



Tina Doney
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PHYSIOTHERAPISTS



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I took my three month old baby to the doctor for a check-up, and she told me that my baby had flat head syndrome. What is that, and can physiotherapy do anything for that?

Flat head syndrome is a problem that babies can get because their skulls are so soft, and the skull becomes flattened when the baby lies in one position for a prolonged period of time.

Because it is important to lie the baby on their back to sleep to prevent SIDS (Sudden Infant Death Syndrome), the baby tends to spend a great deal of time in this position at night and during the day sleeping. As well, the infant car seats, although they are so convenient in that they convert into a stroller as well as a car seat, the baby tends to spend a great deal of time in the seat, again with pressure to the back or side of the skull. Over time, the skull can become flattened, and the muscles of the neck shortened on one side because of the position of the head.

What can you do? When the baby is not sleeping or in a stroller, try to get the baby in a new position - upright while holding the baby, or doing tummy time. Get the baby used to being on its tummy. It is great for infant development. If you notice that the baby consistently has its head turned to the same side while sleeping, try to turn it to the other side once in awhile to balance things out.

If you notice your baby developing flat head syndrome, talk to your doctor about it. They may suggest you attend physiotherapy to work on stretching and strengthening the neck muscles to ensure proper alignment during growth and development.

Give the therapists at the Halton Community Rehabilitation Centre a try if your infant has flat head syndrome.



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Member of the Ontario Society of Chiropractors
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Q. Every fall when I participate in indoor sports, my feet ache.

A. This is the time of year when many changes occur. The environment around us starts to cool in temperature, leaves start to change colour, our hours of work in the garden come to an end, kids start back to school, winter outdoor and indoor sports begin.

Many of us do not realize the potential for injury when participating in sports. It is usually only when a serious injury results, that we seek medical attention. Many kids and parents alike, often complain of nagging aches and pains, but still compete on school sports teams, the adult sports leagues, or even in grade school gym classes. We must remember that indoor sports involve activities on hard concrete floors which are hard on our joints. Sometimes all that may be required is footwear best suited for the sport or best suited for YOUR particular foot structure.

If footwear is not the problem, braces may be required for the knee or arch supports for the feet. With the help of these devices, you can participate in sports or everyday activities, pain free. If you or your children are constantly plagued by ongoing knee or feet problems, think about what the end result might be in 20 years - arthritis.

A career in sports starts at a young age. It is never too young to detect and treat potential problems.

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Q: Question: My mutual funds have not been performing well recently. What should I do?

A: Not all mutual funds are the same. Some funds will perform better in one economic environment than in another. In the future, these same funds may lose value, while today's under-performers soar!

Recently, the Canadian stock market has reflected the strong performance of energy and resource stocks. If a mutual fund invested in those stocks, it would have been successful in the current market. Back in 1997-98, this same success came from funds investing in the financial sector. In 1999-2000 it described the performance of mutual funds investing in technology stocks such as Bell Canada, JDS Uniphase and Nortel. Unfortunately, either the fund that did best in one of these three markets floundered in the next, or it would have plummeted in value in between market rises. Investors do not like roller coaster rides, so be careful! Get the facts.

In all these examples, the good times came to an end. The investment's glory days turned sour. Unfortunately, nothing is forever. What worked last year, can be ancient history next year.

Mutual fund investing requires patience, discipline and a diversified portfolio. Knowing the mandate and decision making process of your mutual funds' decision makers will help you assess the why's and how's of a fund's performance.

Never assess future performance based upon past performance. Get the best information on minimizing risk, and maximizing investments' returns. Always consult a qualified financial advisor specializing in mutual fund portfolio design.

Remember, yesterday's individual fund results is not important. It's what your portfolio will do in the future that is important.

Questions about your investment's performance?

Contact our investment professionals for a second opinion at 905-876-0120.

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Yvonne Oliveira

TROUBLESHOOTING YOUR HEARING AIDS

If your hearing aid is not working check these items:

BATTERY Put a brand new battery in the hearing aid. Be sure the battery is the right size and is inserted correctly. Use of a battery tester can help you determine when a battery needs to be replaced.

BATTERY DOOR Be sure the battery door is closed completely (snapped shut) when the hearing aid is being used.

WAX Look at the canal end of the hearing aid and find the little white sound tube. Check to see if the hearing aid is plugged with wax. You will need to use a bright light to see into the sound tube. If the tube is plugged, use the little wire tool provided with the hearing aid and carefully pick the wax out. BE CAREFUL not to push the wax down into the tube. Remember there is a speaker at the other end of the tube, so do not go too far into the hole.

CORRECT POSITIONING Be sure that the hearing aid is positioned in the ear correctly and pushed firmly into the ear canal. Look at the top ridge of the outer ear (the helix) and be sure the top of the aid is tucked in behind the skin. Look at the bottom of the ear and make sure the hearing aid is inside the notch. Be sure the hearing aid is in the correct ear. Some aids have red markings for the right ear and blue for the left. If a hearing aid hurts, your Audiologist can help!

SWITCH SETTINGS If there is an on/off switch on the hearing aid, be sure the switch on "M" for microphone, "T" for telephone or "O" for off.

TUBING If the hearing aid is a behind-the-ear type, check to be sure the tubing is not twisted or plugged. Hold it up to the light and look for drops of moisture in the tubing. Be sure the tubing has not become hard or cracked and that it is still firmly attached to the earmold.

VOLUME CONTROL The volume control should be set correctly. It should not be all the way off, and usually should not be all the way on. Forward or up is louder, backward or down is softer.

WHISTLING If the hearing aid whistles:

- a) be sure the aid is inserted correctly (see item above)
- b) be sure the volume is not turned up too high (see item above)
- c) be sure there is no wax in the ear canal.

If the hearing aid still whistles you should see your Audiologist as it may be a fitting issue.

BOOKLETS Read the instruction booklets that came with the hearing aid.

If you have further questions or need help ask an Audiologist at the HearSay Speech & Hearing Centre (905)875-3345. We can help!



Debbie Hawkins
B. Sc., DVM

Hawkins Animal Hospital

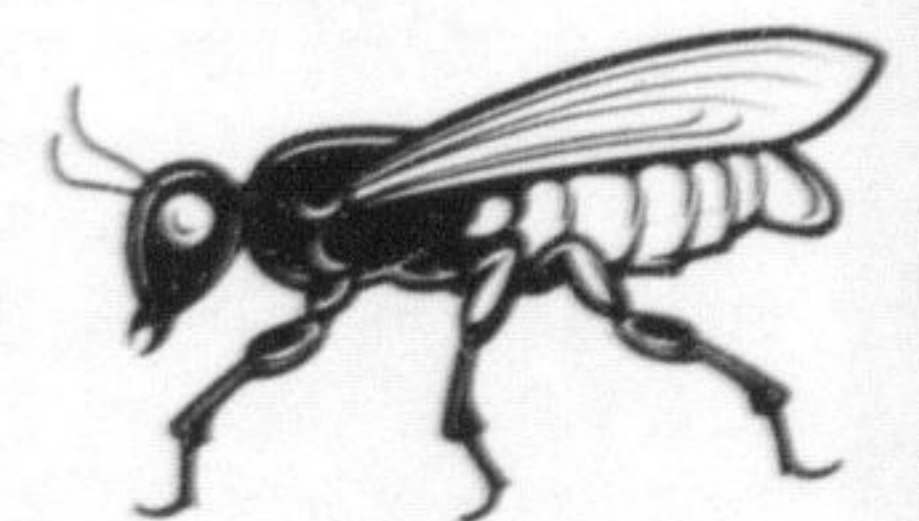
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THE DANGERS OF WASP STINGS

I think that September is, by far, the worst month for wasps. It is the one month that I detest eating outdoors, either at home or a restaurant for fear of getting stung. I treat more dogs for wasp bites in the month compared to any month in the summer. There are 3 different types of reactions that animal and humans can suffer after being stung. The first is pain and mild swelling at the site. This is a normally what happens to an individual that does not have an over reactive immune system and generally does not require immediate attention. Some individuals with over reactive immune systems can have an allergic reaction.



In dogs, this can be anything from massive swelling of the head (angioneurotic edema) to difficulty breathing, intense itch all over, circulatory shock and even sudden death.

Luckily, in 15 years of practice, I have only once encountered a dog who died of a wasp sting.

Most reactions we see involve swelling of the head and are easily treated with injectable antihistamines and anti-inflammatory. It is very important to seek medical attention if your dog shows these symptoms or if your dog has suffered a reaction in the past. Successive reactions can have worsening symptoms. If you are going somewhere remote with your dog, it is always a good idea to carry some Benadryl with you, or if your dog has had an extreme reaction in the past, consider carrying an epipen. Your veterinarian can advise you on your dosing.

One of my retrievers, Dolly (of "Ask Dolly" fame) only has to look at a wasp and I have to jump into action with allergy reaction medication.

Anyway, enjoy what is left of the summer, and we will see you at the Milton Fall Fair Pet Show, at the end of the month.