

seen a news show on TV about how much the technology had improved. He discussed the idea with Lara, then they contacted UCLA Medical Center to set up a consultation.

Designed for people who have severe or profound hearing loss in both ears and who don't benefit from hearing aids, cochlear implants stimulate the auditory nerve to promote hearing. Early versions of the implants had limited frequencies, but today's models allow for a better range of hearing. Because of their effectiveness, most insurance companies, including Mike and Lara's, now cover the cost, which runs about \$40,000, including hospitalization, surgeon fees and rehabilitation.

In back-to-back surgeries last September, neurotologic surgeon Akira Ishiyama, M.D., of the UCLA Medical Center, placed the implants behind each of their right ears. Five weeks after surgery, once the area has healed, the implants will be turned on. If all goes as planned, they will both hear not only each other, but also a whole world more.

"We never know what will happen," say Stanton Jones, an audiologist at UCLA, who will activate the implants. "I've seen reactions range from tears to terror to ecstasy."

The Feel of Sound

The couple can only imagine sounds from feelings. "When I crunch a leaf in my hand or shake a marble in a can, I have a feeling of what that sounds like," says Mike.

"When I read an author who writes about a sound from the hearing world, like a crackling fire, I ask a hearing person to explain it to me," adds Lara. "Is it soft?" she asks, putting her thumb and forefinger together gently. "Or loud?" She violently shakes her fists as if holding two maracas. "I can imagine what bubble wrap sounds like when I pop the bubbles between my fingers. Once I get the implant turned on, it will be interesting to see how right I am."

Restoring hearing is half the battle, explains Dr. Ishiyama. The other half is making sense of sound.

Rehabilitation will help, but whether Mike and Lara will ever be able to decode the intricacies of spoken language, no one knows.

How long a person has been deaf and whether he was verbal before losing hearing helps determine how successfully he will understand spoken language once hearing is restored. Those who have recently lost their hearing and who spoke and understood language before fare better. Small children who receive the implants early can often pick up language as well as any hearing child.

But for Lara and Mike, there are other complex issues. What if one of them grasps spoken language while the other simply cannot? What if the communication between them, that until now has been seamless, suddenly becomes halting and impatient and lopsided? What if the lovely ebb and flow of their relationship is forever altered, and not for the better? What if one of them wishes all this had never happened?

One Tone at a Time

In the small audiology lab at UCLA Medical Center, a crowd has formed. Lara and Mike sit waiting self-consciously, clearly not at home in the limelight.

Beside them, Jones sets up the computer that will activate their implants. Next to him is a sign interpreter, and on the couple's other side are Krystle and Lara's father and stepmother, Bud and Shirley Childs. There are several TV cameras and a standing-room-only flock of reporters.

The procedure will take nearly an hour for each patient, as Jones fires up 24 electrodes one at a time to set the frequency and intensity ranges. He'll then adjust the volume to register both the softest sound his patient can hear and the loudest tolerable for each frequency band. When all 24 are on and adjusted, he will turn on the speech processor, which will make all frequencies

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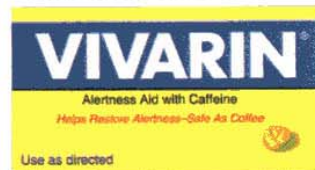
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