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Message from the Editor-in-Chief

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I went out for a walk the other day in my backyard when I ran into none other than Sir Isaac Newton, the grand-father of gravitational theory and many other inventions. After exchanging pleasantries and being surprised to see him since he is almost 400 years old, he had some interesting insights into our current COVID-19 situation.

It seems that Isaac, long before he was Sir Isaac, was a student at Oxford University in England when the Black Plague had its way with the population of the world. Among other things, the university was closed down and all students were sent home to be in as much isolation as could be mustered. And while he was at home, not "cluttered" by all the things he needed to do at school, Isaac Newton conceived his theory of gravitation.

Newton

It was the change in circumstance brought about by the Black Plague that allowed him to see the forest and not be obstructed by the trees. His theory of gravitation stood the test of time until the 1880s when holes began to appear in his theory, first by the Michelson-Morley experiment in 1885, and then later work by Max Planc (1900), and Albert Einstein in 1905, and again in 1916.

The point is that a change, even one as dramatically imposed upon us by COVID-19, can have a silver lining. Personally, I have finally gotten through my reading that I put off from 2014 and now am starting on 2015. Take this time to mull over where you are in your careers and consider making a subtle, or not so subtle change in its direction – you may be surprised where you end up.

And one of the other reasons why I have had so much time is that this issue of CanadianAudiologist has been guest-edited by someone else; all I had to do was serve as a middle manager to ensure that things got to where they were intended.

Marlene Bagatto, PhD, has graciously agreed to guest edit this issue of CanadianAudiologist on the topic of pediatrics and audiology. Marlene has brought together the leading lights from this branch of our field with contributions from Canada and researchers in the United States. Marlene writes a delightful leadoff editorial which then leads into a series of articles that can serve as a primer on everything that we need to know to work with hard of hearing infants and children. You may recognize many of the names of the authors even if you don't work in pediatric audiology since many have been invited speakers at previous Canadian Academy of Audiology conferences. Thank

you, Marlene.

These are trying times. Please stay in touch with your friends, family, and colleagues during this difficult time. I hope to see you this fall at the next annual CAA conference in Ottawa, but only time (and well-informed health policy) will tell.

Stay safe and enjoy the late spring/early summer weather.