James Lind Alliance Hyperacusis PSP. Total number of verified uncertainties from this PSP = 85. Details for Top 28 questions appear first. For details of ALL questions submitted to the PSP, see later in this spreadsheet

JLA question ID	Indicative uncertainty	Explanatory note	Date of priority setting workshop	Rank of the uncertainty at the final workshop.	Evidence
IU18	What is the most effective treatment approach for hyperacusis in children?	See original submissions for examples	23-Jul-18	1	
IU39	What is the prevalence of hyperacusis in a general population and other specific populations (e.g. people with autism, mental health issues, learning disabilities, hearing loss)?	See original submissions for examples	23-Jul-18	2	
IU1	Are there different meaningful types of hyperacusis?	See original submissions for examples	23-Jul-18	3	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research Int
IU19	What is the essential knowledge/training required for health professionals to appropriately refer or effectively manage hyperacusis?	See original submissions for examples	23-Jul-18	4	
IU22	Which treatment approaches are most effective for different types or severities of hyperacusis?	See original submissions for examples	23-Jul-18	5	
IU75	Is hyperacusis due to physical or psychological issues or is it a combination of both?	See original submissions for examples	23-Jul-18	6	
	Which psychological therapy (e.g. counselling, Cognitive Behavioural	See original submissions for examples	23-Jul-18	_	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research Int
IU24	Therapy, mindfulness) is most effective for hyperacusis?	See original submissions for examples	23-Jul-18	7	Jüris, L., Andersson, G., Larsen, H. C., & Ekselius, L. (2014). Cognitive behaviour therapy for hyperacusis: A randomized controlled trial. Behaviour Research and Therapy, 54, 30–37.
IU84	What management approach for hyperacusis is most effective for adults/children with autism?	See original submissions for examples	23-Jul-18	8	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research Int
IU27	What is the best way of using sound in therapy for hyperacusis?	See original submissions for examples	23-Jul-18	9	
IU85	Which self-help interventions are effective for hyperacusis?	See original submissions for examples	23-Jul-18	10	
IU51	What are the risk factors for developing hyperacusis or making it worse?	See original submissions for examples	23-Jul-18	11	
IU5	Which interventions in a school setting are useful for children with hyperacusis?	See original submissions for examples	23-Jul-18	12	Rosing, S. N., Schmidt, J. H., Wedderkopp, N., & Baguley, D. M. (2016). Prevalence of tinnitus and hyperacusis in children and adolescents: a systematic review. BMJ Open, 6(6), e010596. https://doi.org/10.1136/bmjopen-2015-010596
IU29	Which drugs are effective for hyperacusis?	See original submissions for examples	23-Jul-18	13	
IU81	Which criteria should be met to diagnose hyperacusis in adults/children?	See original submissions for examples	23-Jul-18	14	
IU14	What is the most effective treatment approach for hyperacusis in adults?	See original submissions for examples	23-Jul-18	15	

IU69	Is hyperacusis related to physical changes in the ear or brain?	See original submissions for examples	23-Jul-18	16	
IU60	Is there an association between hyperacusis and other ear-related conditions (e.g. superior canal dehiscence syndrome, Meniere's, Waardenburg syndrome, vertigo, vestibular migraines)?	See original submissions for examples	23-Jul-18	17	
IU71	What area(s) of the brain and patterns of activity is/are associated with hyperacusis?	See original submissions for examples	23-Jul-18	18	
IU58	What is the relationship between mental health and hyperacusis?	See original submissions for examples	23-Jul-18	19	
IU80	What is the best way to differentiate hyperacusis from other hearing conditions (e.g. recruitment, misophonia, Meniere's, tinnitus)?	See original submissions for examples	23-Jul-18	20	
IU20	What care is most effective for recent onset/acute hyperacusis?	See original submissions for examples	23-Jul-18	21	
IU50	Can noise exposure cause hyperacusis (or make it worse)?	See original submissions for examples	23-Jul-18	22	
IU82	What are the 'red flags' for serious underlying conditions in hyperacusis?	See original submissions for examples	23-Jul-18	23	
IU54	What is the association between hyperacusis and dementia?	See original submissions for examples	23-Jul-18	24	
IU43	Does avoidance of sound improve hyperacusis or make it worse?	See original submissions for examples	23-Jul-18	25	
IU70	Does nerve damage cause the pain associated with hyperacusis?	See original submissions for examples	23-Jul-18	26	
IU59	Is hyperacusis linked to other sensitivities/conditions?	See original submissions for examples	23-Jul-18	27	
IU34	Would restoring hearing (e.g. regenerating nerve cells) improve hyperacusis?	See original submissions for examples	23-Jul-18	28	

					SOUI	ICE OF UNCERTAINTY					EVIDE	NCE	
CODE	INDICATIVE UNCERTAINTY	ORIGINAL UNCERTAINTY	Contributing raw submissions	Healthcare professionals	Patients	Parents Carer	Family/ Friends	Education Other	N/A	Why is there uncertainty?	Systematic reviews that need updating or extending	Evidence from other relaible sources (guidelines, scoping reviews)	Ongoing/completed controlled trials
IU1 A	e there different meaningful types of byperacusis?	Could current healthcare services be improved by providing a clearer definition of diagnosis for people who experience	31	y X	16	2 1	۰	1 1	1	No systematic reviews, scoping reviews or guidelines identified.			
		sensitivity to sound at any one time ie ear problems us psychological problems. Is there a universal definition of hyperacusis?		×									
		Are there are subtypes of hyperacusis? when are most effective ages for intervention		×									
		A lot of people [with normal hearing] find certain noises quite unpleasant eg, the scraping of chalk on a blackboard/sound of rubbing on a balloor/high pitched screeching - is hyperacusis simply an even greater sensitivity related to the same cause ?						x					
		Do different causes result in different mechanisms of hyperacusis? It herencesses in that sense suit a membern like a room in ather than a condition in its own minh? X. Would the field and patiently benefit from dividening the subscrippions (e.g., with or without inviting, with/without reactive timelts; with or without pains)? That might aid in studies as well as developing treatments that work better in some types of maintains.			x x					}			
		3. Would the field (and patients) benefit from widening the subcategories (e.g. with or without tinnitus; with/without reactive tinnitus; with or without pain)? That might aid in studies as well as developing treatments that work better in some types of		x		×							
		castients. The LDL test is condisted and basically diagnose everyone with some DST with hyperacusis when in fact there probably are several different forms of DST (not just hyperacusis when in fact there probably are several different forms of DST (not just hyperacusis, microphonia and phonosphobal), instead, the patients should describe their venetoms and from there he out in different around of different diagnosis.							×				
		several different forms of DST (not Just hyperacusis, misophonia and phonophobia). Instead, the patients should describe their semptoms and from there be out in different arours of different diaenosis.			×								
		The biggest question of all is where you got that 8% number and why on earth someone thinks it would be productive to			×								
		continue to lump someone was sound sensitivity in with people who have pain from every day sounds. I think we should focus on a specific definition and come up with a number that's real which is nowhere near 8% and probably nowhere near 3%.											
		I would like to know what it is about this small group of children which makes them so resistant (personality, genetics, damage within the auditory system) to treatment. Answer to this question may also give us insight into the underlying mechanisms, identify at the outset children with only not be cardiades for treatment options we currently have available and to look for		×									
		other wavs of hatoine theise children. When a child had hyperacusis is there a difference in severity with different syndromes and developmental are				x							
						^		×					
		How can be better characterize the sub-tones of housescosis? How meno variations of theoreticals are there, and what are their characteristic semestoms? It would really also pare if my soon disposs in screen way quantified what he experiences - so could they give a grading of the			x x	x							
		condition? Why can't we have a consistent definition of hyperacusis, and perhaps categories that are very specific, separating hyperacusis with pain from other conditions?			×								
		wint own from other consistency What are the underlying mechanisms of hyperacusis and are they different depending on the cause? It seems quite likely that			×								
		What are the underlying mechanisms of hyperoxicals and are they different depending on the cases? It seems guite likely that for come it originates in the averse, for some the sent, and for come the basis. We need to determine the physical underlying mechanisms and blow they night define from one person to the need and may be one affect from it it should be treated.			*								
		Why do we continue to allow people to have such varied definition of hyperacusis, and interchange the terms hyperacusis, phonophobia, misophonia, and sound sensitivity? These need to be specifications such as "pain on two or more frequency is believe 90 dit; To prevent some of the territle things the particitionse do that harm their patients.			×								
		below 90 d8", to prevent some of the terrible things the practitioners do that harm their patients. Well first Infon's hallow your on account are must long about the management of becomes without deficit.					1			-			
		Well first I don't believe you can answer any questions about the management of hyperacusis without defining it and having everyone working with the same definition. I think you have to practively define hyperacusis and then I understand that there are likely five or six different types from different underlying mechanisms. On question might be, "now does hyperacusis caused by a rare end car accident differ from hyperacusis caused by noise, in			×				L				
		One question might be, "how does hyperacusis caused by a rear end car accident differ from hyperacusis caused by noise, in terms of the physical mechanisms involved and how they might be mediated.			×]			
		One quarties omigit be, "Two does hyperacous counts by a raw or and or accident differ from hyperacous counted by roots, in terms of the prigation inharms involved and lovely have good been recommended to the counter of the programment of the counter of the cou		×	×					1			
		Difference between fourtness discomfor, dysacusis and hyperacusis How can you prevent something that is still so unclearly defined.		×	x								
		The control former of		×			1			-			
		patient understanding of the condition? Ear pain and lasting injury sensations (whether or not it is to actually damage) are described with more pleasant words such as "kindling", "winding up" and "bad days." Misophonia (classically a congenital			×								
		condition with a primary complaint of rage from specific sounds) is used to describe discomfort or pain from aversion to sound. However terminology used for chronic pain may be more appropriate for this phenomenon as discomfort/pain is often the			_ ^								
		normany complaint, not emotion. 1. Should there be an increase in the breadth and dimensions of hyperacusis subcategories in order to aid mechanism research that may lead to agreed treatments? Pain, for example, has many subbypes and the dimension of setbacks seems very helpful			×								
		that may lead to targeted treatments? Pain, for example, has many subtypes and the dimension of setbacks seems very helpful to consider. Are there different horse of hunariarisis that require different amonarhas to treatment?			×								
	oes diet have an effect on hyperacusis?	AND LITTLE MINISTRY AND REAL VIOLENCE AND STREET SHIPTING AND DESCRIPTING	17		,		3		0	No relevant systematic reviews or guidelines identified. Relaible up-to-date scoping review revealed some evidence for continuing uncertainties about		Facturell, K., Potgister, L., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017) Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research International, 2017.	
102	ses oner nave an emici on hyperacusis?		.,	•	,		,			scoping review revealed some evidence for continuing uncertainties about effects of diet.		Position and Determine Priorities for Research. BioMed Research International , 2017 . https://doi.ore/10.1155/2017/2723715	
		does vitamin difficiency cause hyperacusis Do supplements reduce the incidence of hyperacusis?		X X									
		So audientes chades the societies of the interession? And the surface of the societies of the interession of the societies of the interession of the societies of the interession of the societies of the societies of the interession of interession of interession of the interession of the interession of in		•	×								
		chipotle / Odoba, curcumin, Advil. All make my ears break into horrible impromptu sessions of majority intensified hyperacusis with pain. An hour to six bours after consume			×								
		After taking ASTA FX for about three weeks most of the symptoms i had for four years were mostly alleviated. Astaxanthin is the main ingredient. Can more research be done on this and the word spread about treatment?			×								
		does caffeine cause hyperacusis? Does citrus flavinoids help or hey, just the rind of the lemon? Can reducing caffeine, for example, help reduce hyperacusis?					×						
		Can det help to prevent hyperacusis developing?			×								
		Can avoiding alcohol and caffeine help? Does notrition and diet have a role in the cause of hyperacusis?			x x x								
		Can hyderacusis be prevented with diet and nutrition? Can hyderacusis be prevented with sood hydration?		×	×								
		Do anti-oxidant foods help prevent hyperacusis? Does diet affect hypercusis?		x	x								
		. Ace the distary recommendations? Does certain things Le smoking drinking alcohol, lilegal drug use, eating certain foods make this condition worse,			×					1			
IU3 C	ses exercise/physical activity have an effect on hyperacusis?		3	0	3	0 0	0	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.	_		
		Are there a preventative measures (lifestyle, diet supplements, exercises, etc.) that I can adopt to reduce or eliminate the incidents of hyperacusis?			×								
$\vdash \vdash$		More does nexular ohrsical activity helo? Can exercise helo to prevent hyperacusis developine?			X X								
1U4 A	e online treatments effective for hyperacusis?	How useful /effective is online treatment for hyperacusis?	12	6 X	6	0 0	۰	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		How useful deflective is conline treatment for horenacusis? Is there certine CET designed for poscile with hypogracusis that hais been shown to work? Could I set held treatment on line without agains into a Hospital.		x x]			
		Any agosi? we mainly use hearing therapy, but tinnitus has recently moved into the world of apps and self care, would there be any scope.	· · · · · · · · · · · · · · · · · · ·	x x						1			
		to do this for hoverincusis? Could an Aon be developed that allows occole to perform a self test and to send the results for analysis. Could cognitive behavioral therapy with doctors who are experienced in treating hyperacusis be offered and effective via			х					1			
		Could cognitive behavioral therapy with doctors who are experienced in treating hyperacusis be offered and effective via internet? More research into online or agos bised self help for younser oecole		×	×					-			
		Annex remarks into mentar or axio, seales sent resident societies resident. Cas there, do residenteril care distances all seales remarks and parties of available resident seales and minimize negative clinic experience? Office with themselves can cause discomfort, pain or exthacks for hyperacusis patients that can be compounded experience? Office with themselves can cause discomfort, pain or exthacks for hyperacusis patients that can be compounded			×								
		by an inexperienced clinician.			×								
		Can mobile phone apps be used to manage hyperacusis? Can mobile phone apps be used to manage hyperacusis for people outside of cities			x x								
IUS W	thich interventions in a school setting are useful for children with hyperacusis?	What interventions work best in helping children to continue to learn and cope with noise in the classroom? Should children with hyperacusis receive any additional support or accommodations at school?	22		1	8 5 X	۰	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		What interventions work bed in helping children to continue to learn and cope with noise in the classroom? Should children with hyperacuisi receive any additional support or accommodations at school? What training is given to school staff about hyperacusis?				×				1			
		These distributions and with integrated them in integrated them int		x x]			
		School are at a loss - simply doesn't cope in classrooms and defends nearly constantly. When moving between classrooms he				x							
		As some continues or applier for some in any paper color some or some color or some color some or so some or some color. All the some in the color of the color		x x									
		the money account by hypercuris in the classroom what adjustments are being made in contemporary UK classrooms in resource to humanismis dispensis		*		x				1			
		how effective are those in contemporary UK classrooms adjustments? what classroom adjustments do children with hyperacions find helpful?				x x							
		How can schools help, be better educated to support the child in school during the treatment of a child with hypercusis?		×									
		Does poolitive empethetic support in school improve/igneed up treatment outcomes? what can a child separt a school to do in order to make it is used in to care with acute hearing? how can you be interrupe hyperaccion in cutofol? Could school have school naves school nave school nav		x	x	x				1			
		how can you best manage hyperacusis in schools? Could schools have school nurses advising on this? More support within the education system and school envisonment, which can be very noisy most of the time, including		×		×							
			i e	1	ı	x x	1	1	ı	1	i e	1	I .
		Mode support winns the education system: and school environment, which can be very noisy most or the time, including teaching staff refraining from shouting in class. Bola of advisating school nurses in managing homerarists, dogs this imperson existence for shill down?		×		- -							
me M	frich hearing aid settings (for managing hearing loss) are safest for people with persecusit?	nore support within the equication system in occord environment, which can be very nony most or the time, including the chacking staff referring from shouthing in class. Bold of educating school muries in managing hyperacusis, does this improve outcome for children? How to better education schools?	10	x 0		x				No relevant systematic reviews, scoping reviews or guidelines identified.			

 \Box

	Can hearing aids be specifically programmed to give sufficient applification, while at the same time limiting exposure to		1	1 1	1 1	1 1	_ 1	- 1	1	Ī	İ		
	Any hearing aid assistance that is comfortable to the ear, and any other method that can reduce sound to a manageable level.			×		+	x						
						+							
	off my aids in loud environments so benefitine from the occlusion provided by the 90Cl Does wearing hearing aids increase likelihood of developing hyperacusis?			×									
	Can there he a hearing and that has come kind of hulls in amaliar or that certain frequencies can be inwent/articulated hafters			x		$+ \mp$							
	thev reach ears?			x		+							
						1 1							
	I think hearns and technolose needs to focus on better management of peak volume. I would like to see an improvement in the HNS hearing aids to make them fit more securely and therefore cause less distortion.			x x									
	of the sound.									No selected outcomes an investigation		Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017).	
earing aids (for managing hearing loss) an effective treatment for hyperacusis?		10	1	9	0 0	۰	۰	0	0	No relevant systematic reviews identified. Reliable up-to-date scoping review has revealed important continuing uncertainties about treatment effects.		Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research International, 2017.	
	Can hearing aids actually make HA worse by over amplifying?			×								https://doi.ore/10.1155/2017/2723715	
	1.Does a hearing aid help by increasing the external noise so reducing the internal noise?			×									
	Can hyperacusis be improved with hearing aids?			x									
	Do hearing aid fittings early enough help with hyperacusis?		x	Ŷ									
				x									
	Many current hearing aids seem to be focused entirely on improving communication, and are difficult or impossible to set up in a way that is optimised for people with hyperacusis: could this situation be improved by setting up a review and analysis			x									
t are the precautions that a dentist should use for their patients who have	framework for audiologists, patients and manufacturers?												
	Desperate need for ways to enable those with hyperacusis to survive dental work without further injury.	3	۰		0 0		۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
	Dentist drills and hygienist tools are very hard to cope with.												
th hyperacusis self-management techniques help to cope with invasive procedures	*** ***** *** *** *** *** *** *** ***	•	-			+ -			-	No selected outlinests regions applied			
saving dental work)?	Does focus on other sound, for example music, lessen the mental pain of dental drilling? (Which is worsened by wearing ear	-			0 0			U		no revenue systematic reviews, scoping reviews or guidelines identified.			
	plugs() What self-management techniques are possible for people with hyperacusis to cope with dental treatment or other invasive			x		+							
In health professionals should work together to provide the best care for adults wit	procedures?	52	21		4 .	,	1	1	,	No relevant systematic reviews, scoping reviews or anishilines identified			
acuis?	is a MOT (multidisciplinary approach) approach required in managing Hyperacusis?		×	-		+ +		-	1	Particular of Services of Services of the Serv			
			x x			1 1							
			×										
	How many patients country wide (UK Wide) have been helped by their local Audiologist's When should be oncedified this country.		×										
	Can audiologists refer patients to these services (after care services and support gps)? It care models within audiology batter than within mental hapith or in both models?		x x			+							
			,			1 1							
				×		+							
	Mental health care may be better than medical care for sufferers as hyperacusis can be quite disturbing or frightening.			x									
	Would greater understanding and communication between professionals improve hyperacusis? Is there a multi disciplinary approach to diagnosis, to rule out other disorders!		x	x		+							
				×									
	How to find/identify health care providers with expertise in this field? Who is the best specialist to give this diagnosis?		x	х									
	Can hyperacusis be managed better in audiology? Is management provided by audiologist effective?			x									
	Pathway to identify and a clear pathway to support. Is care determined by a consensus of multi disciplined hearing professionals better than a sufferer seeing different health care.			x x		+							
	professionals for different hearing and balance problems? Could healthcare be inprived by referring people to counselling services immediately when diagnosed?												
	is it better to see an Ent consultant or an audiologist? should there be a joint psychology/ audiology approach to managing hyperacusis?-this would enable both audiological and			×		+							
	psychological management to go side by side as after all in most cases significant hyperacusis has both elements audiological and a psychological.					1							
	What healthcare services most benefit people with hyperacusis. Should ep's and ENT consultants work more closely with audiologists to learn about hyperacusis?			x									
	is care provided by auditolossis better thin care provided by ENT consultants? Can auditologists better the patients with hyperacusis? Model the provided by a consultant patients with hyperacusis?		×										
	is care provided by my local doctor better than the care from my hearing specialist. To be honest my doctor has never asked me about libraried operial units he set on to			×									
	Which specialty is best placed to provide holistic care for patients with hyperacusis? Psychologist vs Hearing therapost / audiologist?						x	х					
	Can healthcare improve by hearing therapy experts available at every team? Can audiologists deal with hyperacusis?		x x										
	Could improvements be made to provision of hyperacusis services by employing more specialised counsellors within Audiology Services		×										
	What type of specialist can diagnose or treat hyperacusis? Is care provided through therapy better than care provided by GP's?			x x									
	Is care provided by a hearing therapist better than a practitioner of CBT with knowledge of hyperacusis and tinnitus?			x									
	What type of clinicians are the most successful in the treatment of people with hyperacusis? should hyperacusis be managed within a multidisciplinary team?		x										
	is a neuro otologist better equipped to handle hyperacusis than otolaryngologists? Who should they refer them to initially?		×	×									
	What is the best streamlined pathway for a patient presenting to audiologist/GP with hyperacusis? or hyperacusis +/- hearing loss.		×										
	How could sufferers be better referred to treatment options.			x x		\perp							
	What healthcare services are provided, or should be provided?				x	1 1							
	Is there some other care other than audiology appointment once every 6mths/annually?		x		x	1 1							
	do we need a better network of people / clinicians who manage hyperacusis - measuring real patient systems					×							
	better healthcare for the Hyperacusis patient.			×	×	\perp							
h health professionals should work together to provide the best care for children	name to make it seems to see LN1 Spicient?	7	5	1	1 0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
(COMPANIE)	How should healthcare services be most effectively organised to provide support and care for children/adults with homeransis?		×										
	Should children with Investacions be supported by audiology or occupational health? Who should access these children?		×			+							
	Bole/make-up of dedicate benediatric timitus and hoseracusis clinics. Could current health care arrangements be improve?		x	×		+							
	I would like to know if there is a care pathway for children who have hyperacusis and where this is. Is current provision effective in managing hyperacusis? If not, how could it be improved		×		×	+							
vate healthcare for hyperacusis more effective than NHS usual care?		3		3	0 0	0	۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
	Is care provided privately better the care provided by the NHS?			x									
			-	x		+							
Is strategies would make services more accessible?		3	1	2	0 0	0	۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
	Could current care services be more accessible? Mow can we improve our services for postients with Hyperacosis if we are in an area where we have to make causes on the year.			х									
	before's financial outlay on a yearly basis when demand on our service increases? Why does it take so long to be referred when sufferine from Invoeracusis?		×	x		\perp							
to the most effective tendence arrange for the contract of		199		6-	10			,	,	No relevant systematic reviews identified. Reliable up-to-date scoping reviews		Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current	
to see ones welective treatment approach for hyperacusis in adults?		.31		63	10 1	1		4	4	important continuing uncertainties about treatment effects and revealed important continuing uncertainties about treatment effects.		Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research International, 2017 - https://doi.org/10.1155/2017/2723715	
	Is care provided by psychotherapy better than care provided by Audiologists		x	x									·
	What is the best treatment, if any, for hyperacusis? Is there an identified Hyperacusis care pathway in place in the UK?												
the state of the s	to the presention that a directed should use to their patients who have provided the best care for obtained. The presentions that a directed should use for their patients who have provided the best care for obtained which together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to provide the best care for obtained and together to	de ou de la teur de commente de la teur de la	Les de la best de la b	Continues to state specified to a control of out of the control of	Control to Language African Control and Co	The content of the	Les of the part of the company from the company of	The Company of the Co	Company	March 1999	Company Comp	Manual Part	Marie

should we be treating byperacutics as a whole person rather than an end organ - this involves more time and is highly specific to the individuals experience so needs a very experienced clinician.		×							
		×							
how do you determine an appropriate management What is the efficacy of the current treatment strategies?		×							
Who should first assess nations suspected of H? What treatment is likely to have the greatest impact? in relaxation, sound enrichment etc.		×							×
is there a need for peer review group sin the treatment of hyperacusis to share best practice		x							
Who assesses whether you have hyperacusis? Are there national suidelines to completine assessment and management.		×		×					
best practice audiance developed how lone would treatment take?		X X							
		×							
Solids in dissolvation and an artist section of the solid section of the		x x							
Does exposure to load music improve hyperacusis?									×
How is dealine with hearine loss and hyperacusis best managed in the early stages of diagnosis What after rise services (symport groups are provided to by presures) patients?		X X							
Could audiology healthcare services be further improved to address anxiety and learnt behaviour cycles by having access to		×							
referral services to a psychologist first for CBT for mild-severe cases of hyperacusis? Then further audiological assessment and intervention?									
I would like to know if there will be development of a hyperacusis protocol for audiologists to follow a gold standard of best		×							
The control of the co		×							
Can therapy tareetine arrolety improve hyperacusis?		×							
Can there be a movement toward development of audiditines for management? how clot therapy could be applied? how ansists therapy could be applied?		×							
how anxiety therapy could be applied?		×							
how act thenory could be applied? We do not currently have a firm strategy for dealing with hyperacusis in adults and children in the service - we need an agreed		Ŷ							
national approach to treatment/ management. I have had neither support nor rare so wouldn't inner where to start other than it would be great we're there rare and support.									
national associate to treatment measurement. These that either support nor care so used in't know where to start other than /t would be great we're there care and support. ACP species no energy to did me that the calcal hospitals had requested that T and H patients not be sent to them as there was nothins their could do for them. Sometimes there could do for them.			×						
As with diagnosis, if a significant percentage of hyperacusis sufferers have CRS, does treating CRS improve hyperacusis?			×						
What treatments can help people with hyperacusis			x						
What treatments/management strategies help and by whom What is the best treatment.	-							-	х
Standard procedure as it seems very hit and miss			×						
What are the effective treatments for hyperacusis? What is the best care and treatment for hyperacusis?	-	X Y						-	
What treatment improves hypercusis			x						
What are the most effective treatments for hyperacusis?			x x					-	_
What is the most effective support and care for people with hyperacusis? The most important questions are: 1. What are the most effective treatments for hyperacusis? We need to have set			×						
The most important questions see: 1. What are the most effective treatments for hyperacusis? We need to have set criteria for the disassion of hoveraccusis? What is the most effective was to manage hoveraccusis? Nation is the most effective was to manage hoveraccusis? It self measurement better than units white noise senerators in children More cent treat hoveraccusis?	-		×	-	-			-	<u> </u>
What is the best model of organisation of support and care of people with hyperacusis?			x						
Is self management better than using white noise generators in children		×	×	H -	_			-	H -
How can I treat hyperacusis?			_ ^						х
Time Lean Lineal Interestination: What does the Current endeline suspent are the most effective methods of managine honeracusis. What does the Current endelines suspent are the most effective methods of managine honeracusis. What does have 2 What desent hade?	 	×	-	\vdash	\vdash		-	-	\vdash
What does held? What doesn't held?			x						
Depression and anoiety are overwhelming, all sounds are too loud. How to avoid physicholopical issues tied to auditory issues? Can we development treatment that work mid-blu?	1	1	· v	-	-		1	-	-
Can we development treatments that work quickly? What treatments actually work of byperacusis? What treatments we effective for only prescusis?			x						
What treatments are effective for hyperacusis?			X						
Does my GP know how to treat hyperacusis? Is it more effective than self-management?			x						
What is the best way of managing hyperacusis?			×						
What can sufferers put in place to moderate the effects? What can be done to help? and does it help? How?			x	×					
Are there other ways to manage hyperacusis alongside wearing white noise generators?			X						
is care provided by counselling/psychology better than wearing white noise? Why is habituation not effective for all experiences of hyperacusis?			x						
what is the best way too not be afeccted to this hell?			×						
what treatment is best. If any Are coxchological treatments more effective than medical ones?			x						
Can hyperacusis be treated with medicine or is the treatment solely psychological? What is the host and post effective force of treatment?			×						
What is the best and most effective form of treatment? how to manage hyperacusis, give patients realistic expectations about the length of treatment, how beneficial it may be and		×							
what can be done if it is not successful.				×					
Is there a way to convent it or just manage If someone is also suffering from timitus, does a combination of improving timitus alongside hyperacusis work?						×			
On any treatments worsen condition?			×						
Do serv treatments worsen condition? What are the management options for children and adults? How soccessful as the management options?		×							
How successful are the management options? How is heat to manage it?		×		×					
What's the best source of support?				×					
What helps the most? Are there any successful treatments for hyperacusis?		×		×					
These seconds are the measurement entoring? The second in the first missess of a second in the seco		×							
What evidence exists that the various treatments lead to better outcomes for patients? Does conditioning improve hyperacusis and how long does it typically take?			X X						
And does hyperbaric oxygen work? Some say not.			×						
What treatment would help with those with hyperacusis caused by migraine? If one does get better from Hyperacusis, how do they ensure they stay better and not regress?		×	×						
		x	х						
More research into what actually helps hyperacusis but also online or apps based self help for younger people What treatments are most effective?		×	x	L-	L-	<u> </u>			L-
How well do these (rehabilitation an self management technique) work vs WNDs			х						
When will there be a health care standard for treating hyperacusis? Whats the best management strategy		x		L-	L-	<u> </u>			L-
Some evidence of hyperacusis management being effective and which aspects		×						-	
How do you convince a patient (adult or child) to participate in management strategies as most want a quick fix?		x			L				L
If no specific treatment has still been found, what can make the sound level sensitivity at least more acceptable? - Wearing musical ear plugs helps a lot in many situations where we do not control the sound environment (street, public transportation,			x		_				
person exclamations, etc.), but it is not a solution.									
What treatment can improve hyperacusis? Is there any proven effective treatments?		 	x x	—	—			×	-
Development of standardised treatments and pathways		×							
What assistive device is might be available to help people with true hyperacusis with pain? how can we make people with hyperacusis more comfortable and have better and more productive lives, living with their	+	 	×	-	-		 		-
hyperacusis?	1		x						
Why is there still no accepted holistic model of shared care across the medical/para-medical spectrum for hyperacusis	1	1	×				1	1	
is support offered by medical services to treat the individual better than that offered by councils which deal with the source of			x						
excessive noise Best practice guidelines for provision of service for patients with hyperacusis	+	×	-	-	-		 		-
Are any of the techniques currently prescribed actually effective over and above placebo?		×							
Is appoint offices by medical services to be not the instituted before them for directly accounts which deal with the source of the profession profession of services and present the hypersona. One are of the individual committy presented activative general techniques (services and account of the individual committy accounts of the individual committees and individual committees		t	x	-	H		1	—	-
Are there any treatments that improve hyperacusis?			x						
Could any divice to be made to treat hyperacusis? 1. Does accommodation of patient requests to family and employers impact treatment outcome?		t	x	-	H		1	—	-
What is the most effective and efficient treatment for hyperacusis?		×							
How do clinicians assess the improve of hyperacusis and the specific nature of an individual sufferers condition?			×	l	l			1	l
What are the most affective treatments?			x						
Can existed of hyperacusis be reduced in frequency? Does treatment improve hyperacusis?			x						
What treatments improve hyperacusis?	-		×					-	
Is it only diagnosed verbally, by what patients tell you? Are there any other ways of managing it that eases the wild fluctuations?			x x	L-	L-	<u> </u>			L-
What treatments are available?			x						
Current research would suggest that treatment can be ineffective and potentially damaging. What devices are available to alleviate the symptoms.		l	×	l	1		1	1	l
			×						
How sufferers would be expected to work alongside the medical proffision,what drugs,therapy could we expect as individuals to be given to us and an explanation on how these may work to try to alleviate the symptoms on a day to day basis		l	×	l	1		1	1	l
Which current management has been shown to improve hyperacusis?								×	
	ĺ	1	1	l	1		1	1	l
It is now a case of managing his aroiety, assisting him with challenging, sudden sounds, and allowing him to explain when he is overwhelmed (sometimes a while after the event). He says to new people he "hears everything the same" and this is a real									
It is now a case of managing his arrolety, assisting him with challenging, sudden sounds, and allowing him to explain when he is overwhelmed (unnethines a while after the event). He says to new goople he These: everything the same "and this is a real challenge for others to understand but he explains it well by saying his volume receptor is set to max! What other treatments				×					
Which connect management has been thosen to improve hyperacusts? It is rose a case of managing this annex, southing time with challenging, solden sounds, and diffusing Winto explain when has in the case of managing this to explain when has in the case of th			×	×					
and a second control and a second sec			x x	×					
It is now a case of managing bits arriver, saming the set thicknessing, sudden sounds, and allesing then to explain which is the control monoconducted (productions and which led the event, "but to the sexplain the exception give such that is not a set of the sexplain to the sexplain that the explain the effect of the explain the			x x	×	×				

	What treatment/s are effective?		×			L				_		\neg	
	What treatment/s are effective? You can we compare consisting and sound therapy to CBT in the treatment of hyperacusis? Which treatments have been proven to help, and how do they help		×		×		丰	#	=	Ŧ	=	ĺ	
	those between the control of the con		×		×		垂				=		
sed in different populations?		171		83	8	4	2	2 4	4		4 7	60	relevant systematic reviews, scoping reviews or guidelines identified.
	can we reary estations using your what diagnostic step can indicate the presence of hyperacus's and how reliable is this. In what way should sendicise to exercit he assessed when a right is first diagnosed on the autistic operature?		x x		×		_		_	-	=1		
	can we ready establish using PTAD what dispersance of hypersaccis and how establis in this what disproses exerting can indust the presence of hypersaccis and how establis in this what was about animatively to search the assessment where a child is first diagnosed on the auditict spectrum? The his flood searching to search assessment where a child is first diagnosed on the abotict spectrum? He where was prefix dispersaction of the abotict spectrum? He where was prefix dispersaction of the presence of the abotict spectrum?		×		x		=	_	=		=		
	What is best way to diagnose hyperacusis - does it relate to cause and risk factors - is there more than one way?		x x										
	we need protocols for teitine and categorisine the degree of invogracusis How to evaluate hyperacusis and diagnose and of course treatment guidelines. This two combined for autism too		×										
	How to evaluate hyperacusis and diagnose and of course treatment guidelines. This two combined for autism too		×										
	how do you determine the severity of hyperacusis and therefore appropriate management. Should an MM be done to disampse masons for HP		×				_		_	-	x		
	How do clinicians check for hyperacusis in adults? Is the measurement of ULLs (with caution) a possible method?		x x				=	==	=		=		
	If so should stimuli other than pure tones be used? Is there a standard outcome measure for both children and adults?		x x				_						
	Mow accurate are present assessments? What evidence based test battery is available		x				_	×	+				
	How can we differentiate hyperacusis from normal behavioural development (i.e. dislike of loud sounds such as hand dryers) in young children? Is there a functional test other than "talking" which could be used to test babies and toddlers who show adverse reactions to		×										
	sound?		x x										
	Number of ENT Consultants with the knowledge of diagnosing and treatments available What ausiological test battery can be used by ausiologists to detect hyperacusis and help monitor progress or regression in		×								=		
	their patient's follow up consolation sessions? Can standards for case history taking and questions be developed? Could there be greater claimly for ent clinics about the top 3 diagnosis tools for hyperacusis?		×				#	×	=		=		
	Could trave to grower clarity or ent crimics about one top 3 or deposition books nor hyperaction? Suggestions to law quadronaries among inclinans assessing patient experience? Reliable, repeatable tools to measure the impact of hyperacusis		x x				=		#	_	=		
	remann, repeatable score to measure the impact on repeatable. Can IDI Lests cause harm? 1. What objective tests should be tried to support and quantify a diagnosis (of course, these tests shouldn't make the patient			x			=		#	_	=		
	uncomfortable or risk further injury)? These might be genomic, epigenomic, or functions along the peripheral and central pathwises.		×			×							
	2. Hyperacusis is generally diagnosed with pure-tone LDLs, but many patients say that they are intolerant of complex sounds like crumoline paper or machines) at fie lower dit than they are of pure tones.		×			×							-1
	4. Standardizing the LDL test – how much do we know about the concordance between audiologists (or same audiologist on different days)? For example, do all audiologists give the exact same instructions on what constitutes 'discomfort level?' if not.		×			х					\Box		
	what's the consequence of that for diagnosis and treatment? What else can be done to test for hyperscuris & its underlying causes besides questions & a hearing test? Think any hyperscurius assessment should include different types of sound - in my case, claeging sounds.			x	\perp	\perp	土	\pm	\pm	1	_		1
	I think any hyperacusis assessment should include different types of sound - in my case, clanging sounds.			x	\vdash	-	\pm	-	-	Ŧ	-7		1
	Corning initially from the world of functional neurological disorders/convention disorder due to additional movement disorder symptoms in addition to sensory sensibilities fedfore being diagnosed with hit glindon syndromely, how do we ensure that people with how hyperacous investigent place that disorders psychogenic likewise/convenion disorder and left without treatment?			×									ı
	people who have hyperacusis aren't just chalked up to psychogenic illness/conversion disorder and left without treatment? I am not aware of any disensatic criteria or tests specifically aimed at HA. Its seems to be whether you flinch at loud sounds			×			-		-	_	-		l
	people who have hyperacous even () and challed up to perform (monitories and contract and the distinct transverse? I are not ease and explanation critical service and contract and contra				\perp	\perp	\pm	\pm	\pm	\pm	_		l
	what methods can be used in hospitals for checking? How can I be assessed for hyperacusis as it affects me intermittently and is not a constant disturbance?			x x x			⇟	#=	=	\pm	\exists		l
	Can we discontinue the ULL nationally please Needs some kind of scale		×	x			丰	#	+	Ŧ	=		I
	hoe do clinicians check for hyperacusis in adults? Are neurological, -nervous system, psychological as well as the physiological taken into account?		×	x			士	_	+	Ŧ	=		1
	thow is it diagnosed? Sensitive hearing is misinterpreted as better hearing. How is hyperacusis diagnosed in adults?			x			*	*	=	+	=		1
	How is hyperacusis diagnosed? How do you measure it?			x x									l
	How many ways to assed or diagnose the hyperacusis do exist in the word and which are the most reliable? The odds of having a hyperacusis incident while I'm at a doctor's or audiologist's office is pretty low. How can they assess it if			×				_	-		-		l
					×		_	_	-		\rightarrow		l
	which large across the great according traces, but which the members are the section of the sect			×				_	-		-		l
	condition.												l
	Is there any test that could confirm the cresence of the hyperacusis in an objective way? Is it possible to diagnose someone with hyperacusis without playing loud sounds in their ears using tone audiometry?			x				_	-		-		
	is it possible to objectively measure hyperacusis, regardless of hearing loss or timitus? How do clinicians measure the seventy of a patient's hyperacusis? I went to several ENT doctors and not one of them even			×			#				=		l
	flow do clinicians measure the severity of a patient's hyperacusis? I went to several ENT doctors and not one of them even mentioned hyperacusis. How can you check for hyperacusis? Any sound assessment would cause an episode of H. Surely you have to take a patients		1	1	1	_	\perp	\perp	\perp	1	×		l
	How can you check for Hyperacusis ? Any sound assessment would cause an episode of H. Surely you have to take a patients send for it! Measure stress hormone levels		1	x	1	_	\perp	\perp		1			
	Measures stress hormone levels assess sleep profile of patient. Are there any tests that can be performed to confirm or rule out hyperacusis?		×	1			丰		x	#	=		
	Are there any tests that can be performed to confirm or rule out hyperacusis? Are there any tests that can be performed with consistent results that would demonstrate improvement in hyperacusis?		×	1	1	1	1			T	\exists		l
	Or is the patient's history the best method of diagnosing hyperacusis? What Questionnaires or outcome measure would be recommended that would measure impact of hyperacusis and		×	1	\vdash	+	#	=	=	+	=		
	what capeloonains or outcome measure would be recommended that would measure impact of hyperaculas and demonstrate improvement? How can is be diagnosed?		×	×	1	-	+	-	+	+			
	How is it diamosed accurately?		x	×	\vdash	+	#	=	=	1	=		l
	How is it diagnosed, it has to be measurable for treatment but how do i commmunicate the level of discomfort? How can hyperacusis be diagnosed and recognized as a true medical condition so insurance will cover treatments? Many		1	x	+	+	+	+	+	+			l
	now can injuriescuss or outgrouse and recognized as a true mercial consistent to insurance will cover treatments? when treatments are considered "experimental" and so are not overed. Are there tests that can be developed to clinically and objectively diagnose hyperacusis to prove that it's not just "all in your		1	x	1	+	+	-	-	+			ĺ
	head? foursk post-obsectall how is hoperacus measured?				\pm		\pm	\pm	+	_			Ì
	How is hyperacusis diamosed? What is the best test to diamose hyperacusis?			x x x			┲	\pm	\pm	Ξ	\exists		l
	How is it diamosed?		×	x	+ =	+=	+ =	-	+	+	\dashv		l
	There does not seem to be a specific tool for identifying hyperacusis, and could there be some research to look at this. is there a test for it?			x	×	\pm	\pm	\pm		\pm	_		
	Could a test for hyperacusis please be included as part of a routine hearing test? How can clinicians test for hyperacusis in children or adults without causing a lot of pain during the following days or even		1	x	1		-	-	-	\mp	\dashv		
	weeks? As mentioned - it's not an issue of static sound levels - it's auditory change. How you could build in an assessment of response		1	×	+-	+-	+	-	+	+	\dashv		
	mesks? An mentioned - it's not an issue of static sound levels - it's auditory change. How you could build in an assessment of response to dynamic change? Then it is disposed? It was it is disposed?			×			\pm	\pm	\pm	\pm	_		l
	is there any formal test eg incorporating calibrated sound? and recording the brain's reaction to sound in cases of hyperacusis?			×						I			l
	An audiology text could be used to see if there in hyperscusis frow do audiologists check for hyperscusis in adults? These accused in hospital assissment in detecting hyperscusis? What findings do specialists base their diagnosis of hyperscusis?			x x x	E	\pm	Ŧ	\pm	\pm	Ξ	3		
	How accurate is hospital assessment in detecting hyperacusis? What findings do specialists base their diagnosis of Hyperacusis			x x			-		-	_	=		
	What is range of normal? (lots of small children don't like handdryers etc - when does this become more severe		x										
	How to assess suicide risk in patients with tinnitus and hyderacusis? How to diaenose it?		×	x			⇟	#=	=	\pm	\exists		
	Why are there not more adequate tests for noise sensitivity observations in special needs school as observing in a controlled environment gives you a false report on there behaviour and sensitivity. When school report they see no typeraccula at school and parents report mass testimost in public places the only opiosien that matter at the school in an EXP plan.		1		×					1			
	Of the children reporting hyperacusis-which should be referred for hyperacusis management and at what stage?		×										l
	Can Uncomfortable loudness levels of lies than 80d8 be used to diagnose hyperacusk? What are "normal" sound losterance levels Tow should clinicate check? Journally measure for hyperacusis in adults and children What tests are most consistent in assessing hyperacusis.		x x x		1		丰	=	#	#	=		l
	What tests are most consistent in assessing hyperacusis.			х			#	\rightarrow	=	1	=		
	What tests are available that would distinguish someone who experiences the condition compared to someone that does not? Is hyperacusis subjective can it be measured by a decibel monitor?		1	x	1	+	+	\perp	\perp	\perp			
	Does assessment cause extra stress in severe cases? There is the need for a standard protocol. Perhaps a clinical assessment might be best, rather than exposine clients to noises.			x	\vdash	+	#	=	=	1	=		
			x x	x	1	-	+	x	-	+			
	Or sention a questionness and of sentitute to do sent smith and charact distances. Are test of light convertible on sentitude of the sentitude of charact distances. These is sewrith of horizonate determined when it assess to serv from time to stem? Can a test the deviceded to distance horizonates observible whethout a satient assessing consistency? Can a settine the excellence of the control services observible whethout a satient assessing consistency. Can a settine the excellence of the control services observible whethout a settine in previously. The security of the individual security of the management of the instructivenescence consistency. These accordance is solviness disconfirm flowed "The management of the instructivenescence constitutions" on the control security of the instructivenescence consistency.			x	\vdash	+	+	=	x	\mp	=		
	The state of the s						#		x	#	=		
	How accurate are injuries discomfort levels? The measure used by timitus/huneracusis martitioners												
	Lan a passent per apposance par so manufacture source severa (see 2.7 codes no quaerte programment source severa have a code no quaerte programment source severa have a code not code			x x			丰	-	=	Ŧ	=		-1

i .	Lots of children have problems with some noises (e.g. hand dryers in bathrooms) which are normal - how do we assess those										1	i i	i
	who are having difficulties and need intervention.		×	\vdash									İ
	should or should we not do ULL to assess as it can make pt anaious etc - agreed literature for pt with hyperacusis How is it actually formally diamosed?		×	×									İ
	Hore is a sculph' formative diamond? A treatment that works is, are and cost questionnaires that shows a barrefit Is there a specific clinical questionnaire can use to assess the sevenity of hyperacussis / recommendations on how to act desendent on sweetive? What standards rains of questions should be asked to diamone horearcusis? What standards rains of questions should be asked to diamone horearcusis?		x x	=			_						İ
	depending on severity? What standard series of mustims should be asked to discovere hungrariesis?		×	\vdash									II
			x x				-						İ
	should ULLs be abandoned in the test battery. Is there any scientific test that shows the signs of hyperacusis and help to precise the diagnostic without exposing too much to sexends difficult for an hyperacusic censon?			×									İ
	is there an objective way for a specialist to observe the moments when my hearing goes distorted when I am in noise?			×									1
	Most effective view to assess, develop a questionnaire that is well normed Is there a unique test for this 2 What is 8? How do people access them?		×	x									1
	How do people access them? Best practice - assessment techniques - evidence-base Do UCL/LDL have any role?		×	\vdash	×								1
	See of VAS/Questionnaires assessing response to treatment How can hyperacusis be proven to an objective standard		x x	×			\rightarrow						1
	now can reperacus assessed in children and adults? Are standard hearing tests used to diagnose hyperacusis.		_	x									1
	To have a hyperacusis test battery		x x										1
	Validated hyperacusis quistionnaire for patients to complete can the degree of hyperacusis be missured for individuals these parts to encourage the encourage of the patients		×	×			_						1
	Is there a way to measure hyperacusis objectively? Need to look at high frequency hearing loss. Standard audiology hearing test only goes up to 8 lds; What happens above that?			×									1
	I was was diagnosed with hyperacusis from my account of symptoms. Another time I was tested with a loudness Test, which I passed except for one tons. It seems that something physical occurs in my ear – a vibration – and eye twitching. If this happens, can It be seen and measures?			x									1
	can it be seen and measured? This happens, can it be seen and measured?		<u> </u>	×									İ
	How can clinicians improve the methods of diaenosine hyperacusis? Most toddlers dislike loud sounds. How do you differentiate a normal behaviour from one which is cause for concern. Can there		×										1
	be a set of questions which sive a score? In there a bespoke assessment tool for professionals dealing with hyperacusis similar to the THI questionnaire for tinnitus.		×										1
	what tests should be done to diagnose hyperacusis? Now can be hyperacusis be measured and assessed without relying too much on LDLs because sensitivity can be to frequencies,		×	-			_						İ
	not necessarily volume?			x									1
	The never been checked, why is that? Would like to know if it's mild or bad with me, Hyperacusis is a no-brainer of a self-diagnosis. My question is: Why do clinicians continue to injure patients with LDL or ULL			x									İ
	6. How can we assess the physiological limits to an individual's recovery?			×			_						İ
	6. How can we assess the physiological finish to an individual's necessary? 2. How can we fully investigate setbacks (rapid and prolonged drops of sound tolerance) in order to provide evidence-based treatment adjustments and sound exposure guidelines. Should clinicians describe all setbacks as just "part of the road to			×									1
	recovery?" 5. Should U.E. testing take into account (for each frequency) whether the limit was determined by loudness, pain, setback,			×									1
	expectation of setback, emotion, dizziness, etc.? What is the diamostic criteria for hyseriacusis?		×	-			\rightarrow						İ
	Which audiological tests should be performed in someone with hyperacusis? audiologist test does not pick up my hyperacussis what will be the reason. 7btw i live in South Africa and most docters is in total		×	x									1
	disabsion about hyperacusis and timitus. How will they diamose and know that the patient has hyperacusis?		<u> </u>	×									İ
	Move is horecrosis disenseed? Is there now a standard test? I would have a very to diagnose hyperacosis without further traumatizing the person with hyperacosis.			x x									İ
				x x									İ
	How is hyperacusis assessed in an impartial manner?		<u> </u>	x									1
	It is closely besided in the patient's associations of the control		<u> </u>	x									İ
	How is this damage found or located? Are there physical ways of looking for it?			x x x									1
	What is the criteria for assessing and diagnosis this condition in anybody of any age Many doctors I have encountered do not recognise the condition or have never encountered it. Is there a simple test that could		+	×			$-\mp$			×			İ
			 				-			×			İ
	Many distors 1 New encountered do not requise the condition or have never incontent 6. Also 65 d. in those without peach or efficient construction. Never can their emproped? These model a second be assessed for a few or few			\Box	×	x							1
	Validation of a robust assessment questionnaire/outcome measure to help diagnose/grade hyperacusis and measure effectiveness of treatment		×										İ
	How reliable is MO questionnaire compared to ULL scores? Mode w is hyperacusis measured? Some people are able to state the level their hyperacusis is.		x	x									İ
	Shouldn't there be a formal assessment/measurement and diagnosis? Is it possible to devise a test for invoeracusis that is not painful for the patient?		+	x x			-						1
	How can they be accurately assessed in detail What should be the minimum assessment tool battery for hyperacusis		x		×								1
	Which auditory electrophysiology methods should be used to identify ULLs? Inow do we evaluate hyperacusis and its burden		x x	=			×						1
	times can then be accommended assessment in detail with a desided but their interminent assessment to the detail of the interminent assessment to the detail of the interminent assessment to the detail of the interminent assessment to the detail of the interminent assessment to the detail of the interminent assessment to the detail of the interminent assessment to the annual to the interminent assessment to the annual to the interminent assessment to the annual to the interminent assessment to the annual to the interminent assessment to the annual to the interminent assessment to the annual to the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent assessment as the interminent as in the interminent as the interminent as in the interminent a		+	x x									1
Which assessments should be conducted in the workplace to monitor and adjust for staff who have or may have invoeracusis?	What tests are currently used to check incorracusis?	5		X 5		_	0		-	_	No relevant systematic reviews, scoping reviews or guidelines identified.		
staff who have or may have hyperacusis?	Mow can we be more supportive of the patient in stavinal in the workforce?			5 X	J	J	۰	•	U	U	no revenue of semantic reviews, acoping reviews or guidelines identified.		
	How can we be more supporting of the patient in staving in the workforce? What support could Occupational Health departments offer to employees who suffer from hyperacusis and what would be most effective?			×									1
	What can be done to ensure that people with hyperacusis are not discriminated against in the lobs market?		+	×			-						1
	Should Occupational Health staff include monitoring of staff for hyperacusis and after the work environment accordingly? How? How informed are occupational health experts on the management of hypercusis?			×									1
What are the indicators for specialist care (e.g. psychological therapy) for someone with hyperacusis?		5	4	1			_		_				
	when would psychology support be indicated?				0	۰	۰	۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	referral criteria to specialist services		×		0	0	0	•	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	referral criteria to specialist services. How does a natient know whether their comptoms are had enceach to seek heio? When should they refer them consurate?		x x	x	0	0	۰	•	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	referral criteria to specialist services. How does a patient know whether their symptoms are bad enpush to seek help?	14	x x	x									
What is the most effective treatment approach for hyperacusis in children?	Inferior Licensia Sa socialist services. Show does a satisfies show whither their sensitions see last enough to seek help? When should then refer them consents? If what societ does the set exact office is other associations.	24			4		0	0			No relevant systematic roviews, scoping reviews or guidelises identified. No relevant systematic roviews, scoping roviews or guidelises identified.		
What is the most effective treatment approach for hyperocusis in children?	Inferior Licensia Sa socialist services. Show does a satisfies show whither their sensitions see last enough to seek help? When should then refer them consents? If what societ does the set exact office is other associations.	14	x x 10 x x	x									
What is the most effective treatment approach for hyperacusis in children?	Inferior Licensia Sa socialist services. Show does a satisfies show whither their sensitions are last enough to seek help? When should then refer them consents? If what societ does the set exact office is other associations.	14	x x 10 x x x x	x									
What is the most effective treatment approach for Ingerescusio in children?	Inferior Licensia Sa socialist services. Show does a satisfies show whither their sensitions are last enough to seek help? When should then refer them consents? If what societ does the set exact office is other associations.	14	x x 10 x x x x x	x									
What is the most effective treatment approach for hyperacusis in children?	Inferior Content to assessible services. The Content and assessible and admitted from consistency and had ensuels his seeds held? In the Content and the Con	14	x x 10 x x x x	x									
What is the most effective treatment approach for Ingenesion in children?	Inflemic Content to transmission that content. Description of the Content of the	14	x x 10 x x x x x	x									
What is the most effective treatment approach for hyperscash in childhes?	Inferior Contents to assessible servicins. The date dates a destination of the dates of the dat	14	x x 10 x x x x x x	x	4								
	Inflement Contents to assessible sections. The Contents as assessible and admitted from consistence we had ensuited his seed held? Intelligence and the Contents and the Conte	14	x x 10 x x x x x	x	4								
	Inflement Contents to assessible sections. The Contents as assessible and admitted from consistence we had ensuited his seed held? Intelligence and the Contents and the Conte	34	x x 10 x x x x x x	x	4								
	Inflement Contents to assessible sections. The Contents as assessible and admitted from consistence we had ensuited his seed held? Intelligence and the Contents and the Conte	14	x x 10 x x x x x x x	x	4								
	Inferior Content to according section. The December of the Content to according section and bear of the Content to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to according to the Content to the Content to according to the Content to according to the Content to the Content to according to the Content to the Content to according to the Content to the Content to according to the Content to the Content to according to the Content to the Content to according to the Content	14	x x 10 x x x x x x	x	4 x								
	Inflient Content to terroristic servicine. The Date Loss a section for substitute of the Content of the Conten	14	x x 10 x x x x x x x	x	x								
	Inflient Content to terroristic servicine. The Date Loss a section for substitute of the Content of the Conten	14	x x 10 x x x x x x x	x	4 x								
	Influent Content to terroristic servicine. The Date Loss a section for substitute to the Content of the Conten	34	x x 10 x x x x x x x	x	x								
	Information to assessible sections. The decides to assessible sections. The decides as the section of the decides of the section of the sec	14	x x 10 x x x x x x x	x	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Inferior Content to Street State Sta		X X X X X X X X X X X X X X X X X X X	0	x x x	0		0	0	0			
	Inflient Content to account of each of the content		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Influent Center and Security and American Security Securi		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Inferior Content to account of a content of a content of a content to		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Information to assessible services. The first dates a term to the design of the control of the		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Information to assess that an extraction of the control of the con		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		
	Inferent Content to State Stat		X X X X X X X X X X X X X X X X X X X	X 0	x x x	0	•	0	0	0	No released systematic reviews, scoping violence or goldelines identified.		

	2. Should audiologists be better trained in hyperacusis, know how to distinguish it from recruitment, and be certified that they can deliver standardized LDL level testing?	x			×					
	2. Should audiologists be certified that they can deliver standardized LDL level testing? (There may be choices, but the choice	×			x			- I		
	used could be stated so that reports, studies and patient treatment effect could be fairly compared)	x	1	1	*			_		
	Can doctors from the different areas work in better coordination in the management of hyperacusis? Not sure, but the health care setting is one of the noisiest settings there is, so many staff lack a volume control, and have		х		+		+ + -	-		
	Not sure, out the master care settings as the other costent settings there is, so many starr fact a volume control, and nave absolutely no concest of how customs their more if seeking to tone is. Do all NHS hospitals have specialists who understand Hyperacusis?		-	×	1		1 1	4		
	Are doctors trained on how to understand hyperacusis?		x		1					
	Which professionals best placed to help? Would improved mental health services and greater understanding and communication between professionals improve	×	1		1	 	×	-{		
			1		1		1 1	4		
	be 'Jack of all Trades'. Not good for NHS staff or their patients.	x		1	1	-	1 1	1		
	Hyperacusis cases who arrive at the audiologist's clinic often have deeper issues around mental health that the audiologist cannot tackle, yet the services to help these patients are gottly and underfunded. Please show through your research how important good, with funded mental health services are to all age groups. That by an order of the properties of the propertie	×	1	1	1	1 1	1 1			
	cannot tackle, yet the services to help these patients are patchy and underfunded. Please show through your research how important good, well funded mental health services are to all age groups. Thank you.	×	1		1					
	Can we Ducati aps more about hyperacusis, run of the mill answer is no cure live with it		×					-		
	Why my GP didn't seem to understand how bad it was when I first visited this wery s		×				x x			
	Why mrv GP didn't seem to understand how bad it was when I first visited thisseev's GP could improve their initial consultation offerine more suspect and understanding a Doc SPs know recent to belia Christone recent to belia Christone recent to belia Christone seed to brief medical doctors about how to recomize hoperacusis.		x							
	Clinicians need to brief medical doctors about how to recognize hyperacusis		x					-		
	I had sympathetic health care but no one with knowledge of hyperacusis until very late - had to seek them out.		×							
	Better education of non audiology professionals about this condition through training, education and online resources	x								
	Doctors and healthcare services should be more educated on hyperacusis and tinnitus, especially ENT doctors - but I don't know which kind of questions you have to ask in order to achieve that.		×				x			
	Why are ENT doctors not more educated on tinnitus and hyperacusis?		x				x			
	Are audiologists competent enough to provide care for people with hyperacusis? Do they understand that it's important to stop increasing the sound level when the patient complains that it's becoming too		×							
	loud to tolerate? Why are FNT dectors not more educated on timping and byseracusis?		+	-	+-	 	×	-{		
	stry are EVE decions interested in intereste				-		×]		
	standard obtis media PLEASE!!		1	1	1		x	_		
	How can doctors be educated to check for hyperacusis? () went to my GP about hearing issues, was given a hearing test with		×	1	1		1 1 -			
	headphones - even though I'd explained I don't have a problem with just one sound but background noises "crowd out" foreground noises, and in the end was told "just concentrate more" which really wasn't helpful.		, ×		1					
	How do doctors train to be familiar with the symptoms		x		1					
	How to educate all health practitioners so suffers aren't fobbed off.	x	x	+-	+					
	Can Pain Clinics be better informed to help people with hyperacusis		×							
	The Mark International Sections from Associational Section from the Commission of th		x x					1		
	There seemed very little understanding of the problem at the specialist centre that I went to. They made you wait in a corridor with many stamming doors and were uninterested when I commented on it I I was tald things that were little desired by later		1				1 1			
	people and I was given lots of contradictory information about hearing aids. They talk to the problem and have no interest in		×	1	1	1 1	1 1			
	piscolis. do ent des set tauaht about hvoeracusis. Medical staff beins trained about hvoeracusis, as it cant be seen pecole lose interest - still a disability		x		<u> </u>			<u> </u>		
	Medical staff being trained about hyperacusis, as it cant be seen people lose interest - still a disability		x x		-	-	1 1	4		
	I would like medical professional taught not to torment people with hyperacusis and made to understand noise can HURT.		×	1	1	-	1 1	1		
	Could current healthcare be Improved by educatine Gp's? Could GPs be better educated about the symptoms and emotional impact of Invoeracusis?		x	<u>t </u>	ш-		1	_		
	Why do GP's treat it as a mental health condition immediately and are reluctant to refer to ENT departments to rule out			х						
	Why are GP's not referrine to ENT to find physical reasons for it before diagnosing it as a 'mental health' issue?			х	1					
	section to missing processions single that is the terminal pages over pages and the pages and the pages of th		x x x	<u>t </u>	ш-		1	_		
	To what extent is the condition well known by providers of primary healthcare - e.e. GPs?		х		-	-	1 1	4		
	could special urest up to estimated doctors and resizes about the surrering or patients with this condition.		х	1	1	-	1 1	1		
	This is an area where I think the most scope is possible. I have been to ENT and a private audiologist and there was little		×		1]				
	This is an area where I think the most scope is possible. I have been to ENT and a private audiologist and there was little discussion about hyperacins and what it was. ENT did not mention it at all, or the tinnibus clinic in the NNS. There should be more patient and self legister. Earn exhauld be provided potentially by all staff but possibly different levels of complexity.	×	×	1	1	×	1 1			
	Should those giving support groups be trained, certified when it comes to hyperacusis. Should overholoaists see asterst with Invarracusis?		x					<u> </u>		
	Should psychiatrists see patients with hyperacusis?	x x	+	1	+		+ + -	-		
	Should Psychology services be used in hyperacusis care?	x x			-]		
	Who should manage pecole with hyperacusis and with what training Either all clinicians within audiology has to complete a certain standard of Hyperacusis training so that nationally patients		1		1		1 1			
	Either all clinicians within audiclogy has to complete a certain standard of Hyperacusis training so that nationally patients receive the same treatment/advice/support or create centres of excellence and all hyperacusis referrals go there.	x	1	1	1	1 1	1 1			
	Is specialty training available to otolaryngologists or audiclogists regarding hyperacusis?		х		-]		
	Could healthcare providers learn about this and not judge My hyperacusis was never discussed or assessed until after my Tinnitus escalated to a severe level. Can people be educated to	*	¥	1			1 1	1		
	check for this before it leads to Timents. If I'll like to be declores deviced before the control of the contro		+	1	+		+ + -	-		
	trying to act as though psychotherapy will talk us out of it. There's a physical underlying mechanism causing my problem!!!		×		1					
	Do care staff, who work with children and adults who are more likely to experience Hyperacusis, get any training on how to		1	×			1 1	1		
	support them?		x		+-	 	1 1	-{		
	Who is best placed to offer management	×			-]		
	What information should GPs eive to patients with hyperacusis?	x x								
	What training is necessary for those treating people with hyperacusis? Credita's treatment ha improved by educating CDs more who often seem unawage of the condition?	x x	×	1	1			-		
	How can a greater awareness be made to overall medical world concerning hyperacussis and treatment.		x x							
	Could cover the software services in instruction by halfer declaration for 0°C off cover the software cover		x x					<u> </u>		
	Available therapy, g.ps being aware and up to date of how this may affect individuals in different ways depending on personal circumstances.		x				1 1			
	circumstances. How can services for people with co-morbidities (such as memory services) better understand, recognise and support those with	x			1			j		
	hyperacusis? what first line advice is given in Primary Care	×	L	<u> </u>	<u> </u>		1	_		
	Can training for ENTs be improved to increase awareness? It didn't seem straightforward to get a diagnosis for me. My ENT		×							
	originally thought I was hyperventilating with anxiety in noisy places despite me repeatedly pointing out that I wasn't anxious.				1			_		
	is there a way to make it easier for patients to find an audiologist with specialist knowledge of how to set up hearing aids for oscole with hoseracusis?		×	1	1	1 1 -	1 1 -			
				×						
	Can you provide better education for G.P.'s? (We mentioned hearing sensitivity many times before it was taken seriously). Once referred by G.P. waiting times to be seen by audiologist are long, can these be reduced especially for children?			_ ^	1			_		
	how do people or gps know where to refer if patient complains of hyperacusis I would like to see a closed link between the GP, the hospital Audiology department, clinics, the researchers and support groups		+ =	1	+	×	+ + -	-		
	who are in short supply. Yes, I would like to see a closed link between the GP, the hospital Audiology department, clinics, the researchers and support		×		1			4		
	Yes. I would like to see a closed link between the GP, the hospital Audiology department, clinics, the researchers and support groups who are in short supply.		x							
most effective for recent onset/acute hyperacusis?		4 2	2	0		0 0	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	What is the most effective way to deliver care at the earliest stages in managing hyperacusis? The first three months of timitus and hyperacusis are so scary and we don't know where to go for help as everything is hurry.	x								
	up and wait because of constraints on the nhs, emergency clinics?		x	1	1	1 1 -	1 1 -			
	Once in the midst of an incident, is there anything that can be done to make it go away faster?	×	х							
mational resources effective for informing people about hyperacusis?	can people after their demandur in the initial states of hyperacusis in order to prevent it becoming worse?	5 5	0		۰	0 0		No relevant systematic reviews, scoping reviews or guidelines identified.		
resources effective for informing people about hyperacusis?	Is info on line		+ -		-			recovered systematic reviews, scoping reviews or guidelines identified.		
	best strategies for children to habituate to hyperacusis and maybe training or app for parents.	×						1		
	information on websites and leaflets on how to self manage hyperacusis. How effective is good online available information for preventing families to need further healthcare access?	x x	<u> </u>	<u>t </u>	ш-		1	_		
	How effective is good online available information for preventing families to need further healthcare access?	x	\leftarrow		-				Salar A Annia A A Annia A A Annia Annia A Annia An	
ment approaches are most effective for different types or severities of		16 7		0	4			No relevant systematic reviews identified. Reliable up-to-date scoping review has highlighted the evidence of different treatment effects and revealed important continuing uncertainties about treatment effects.	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current	
					1			important continuing uncertainties about treatment effects.	Position and Determine Priorities for Research. BioMed Research International , 2017 . https://doi.ore/10.1155/2017/272315	
	is effectiveness related to cause?	x x			-				100 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1	
	necommended management for different severity of hyperacusis. 3. Are there certain subtypes of hyperacusis in which drug therapy (by various classes of drugs) works better? Or subtypes that	×	1		×		1 1			
	drug therapy (by various classes of drugs) makes worse? 5. Are there certain subtyces of hyperacusis in which round/oyal window rainforcement current works hatter? As a harmonic than		+	1		 	+	4		
	round/oval window reinforcement sursery makes worse?	x	1	1	x	\vdash	\perp	4		
	1. Are there certain subtypes of hyperacusis in which sound therapy works better? Or subtypes that sound therapy makes	x	1	1	×		1 1			
									1	i)
	standardized quality of life measures. 2. Are there certain orthogon of homerarisis in which properties between these countries to the colors.									
	sufficiences unless to seaso? **Commencial consequence of otherers assembly of hyperocionis commencial consequences of otherers assembly of hyperocionis commencial consequences of other seasons and the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of the seasons of design seasons of desig	×	×		x					

i i										1
	Can bespoke therapies be developed depending on what noise most upsets patients? eg in my case sibilance and whistle noises		x		1	\perp				
	Does the cause of the hyperacusis vary the type of treatment that is successful in improving hyperacusis?	+	×	1	1	+ F		$-\mathbb{F}$	_	
	4. Do certain subtypes of hyperacosis benefit from reducing their typical sound exposure during setbacks or flareups (also referred to as "resting eas") Pf (in,) how can we investigate whether there is a universal into the how long a person should wait before increasing sound exposure again or if it depends on the individual patient's state?		×			1 1				
	before increasing sound exposure again or if it depends on the individual patient's state?			1	1					
Which management approach (e.g. assessment and treatment) for hyperacusis is more	Do different causes require different treatments?	+	3 0	-	١.	0	۰	0	No relevant systematic reviews, scoping reviews or guidelines identified.	
3 Which management approach (e.g. assessment and treatment) for hyperacusis is most effective for people with learning disabilities?	management strategies children and the this differentiated for children with Autism or developmental delay.		x 0	3	0		-	-	- revewant systematic reviews, scoping reviews or guidelines identified.	
	I want to know about everything particularly as they relate to children like my son who is classed as non verbal. How can we			×	1					
	helio children like him who have very goor receptive and expressive language. Educationally what treatment is advised with hyperacusis mixed with the aresety and development delay of a child in school			×	1					
	classroom example: small classes, quiet class, less stressful environment to manage the stress Can they test people with learning disabilities and limited vocabulary?			ж		+				
	How should hyperacusis be assessed in adults with profound intellectual disabilities who are non-verbal? How can management of hyperacusis be reasonably adjusted for adults with intellectual disabilities?		x							
	How can management of hyperacusis be reasonably adjusted for adults with intellectual disabilities?		×							Fackrell, K., Potgister, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoane, D. J. (2017). Turis, L., Andersson, G., Larsen, H. C., & Ekselius, L. (2014).
Which psychological therapy (e.g. counselling, Cognitive Behavioural Therapy, mindfulness) is most effective for hyperacusis?	39	:	21 12	1	۰	2	1	2	No relevant systematic reviews identified. Reliable up-to-date scoping review has revealed important continuing uncertainties about treatment effects.	The control of the co
	does a desensitization techniques work to improve hyperacusis		x x							
	Which is the most effective form of psychological therapy for helping people to manage hyperacusis? Does CBT work for hyperacusis		^ x							
	Does contitive behavioural therapy help manage underlying anyiety to further return hymetarusis in nations?		x							
	Can Ingressions be prevented by referred for cognitive behavioured threapy? Does CR to high Ingressions? Does CR to high Ingressions? Does crafficings have for an expending continue to the property of th		x x							
	What's the most beneficial form of psychological therapy?		x							
	Is hyperacusis treatable with CBT?		x x							
	Does meridifunes hale? th homercoast header with CET? does TSG descentituation heards the precursis clients. Can behavioral therapes such as descentituation helps with symmetries. the did CET.			×	<u> </u>					
	Role of CBT Would periodic counselline help in the management of hyperacusis	=	x					x		
	Would benodic counselline halo in the management of hyperacuus to counselline more effective than pericipate and the properties to the counselline more effective than pericipate auditory desensitisation or when auditory desensitisation has been tried and found to be							x		
	Should cbt be used alongside auditory desensitisation or when auditory desensitisation has been tried and found to be unsuccessful?		x							
	usescensus? What percentage of children with hyperacusis with and without autism improve with auditory desensitisation/cbt or both toesther.?		x			\perp				
	Do these (self-management tactics) work as well as e.e.CBT		x							
	Ross mindfulness improve hyperacusis? Is aroun therapy better than individual therapy?					x x				
		_	x x	+	+ -	+	_	-+	 	
	Cocks constituted apprehimation of the control of t		x							
	Does CBT improve outcomes for patients with hyperacusis?						x			
	Does thorough counseling of 'patient group at risk' help prevent hyperacusis? Is basic counseling just enough?	_	x x	+	+ -	+	_	-+	 	
	would person centred counselling help alongside audiology support CBT/role of psychological techniques		x x		-					
	Are there any treatments for Hyperacusis, for example does CBT help at all?		х							
	Do CBT reduce effect of hyperacusis Does mindfulness reduce effect of hyperacusis		x x x		<u> </u>	1 -				
	Is counselling the best way in managing patients with hyperacusis? Does CBT improve hyperacusis?	-	x x			-	_	\dashv		
	how effective is CBT in managing hyperacusis?									
	Does being exposed to a charse of sound hato hyperacusis Does CBT hato ?		x x							
	2. Role of CBT 2. Role of Mindfulness	+	x	1	1	+ F		$-\mathbb{F}$	_	
	2. Nobio of Mindfuliness Six best to avoid or desentita? ? SCR and controllinging the host save to help		x x				_			
is the success of hyperacusis treatment affected by the level of support provided by	It CST and reconditioning the best way to help 3	1	2 0	0	1			0	No relevant systematic reviews, scoping reviews or guidelines identified.	
caregivers (e.g. parents, spouses, partners, family)?	Is treatment outcome affected by caregivers (people, institutions) accommodating requests of patients or their accompanying	_	x		x					
	carealvers? How can the dynamics of a family affect the support mechanism for a sufferer		x	_	-					
What is the best information and guidance for parents dealing with hyperacusis in th children?	s s		s 0	0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.	
	is there any written information top help parents of children with hyperacusis		x							
	How as an audiologist do I best advise parents on dealing with hyperacusis in their child Should there be routine advice to parents in the red book (parent-held child health record)		x .							
	What is the best (evidence based Judvice we can give to parents and children about hyperacusis? What is the best advice to give to patients/parents?		x							
What is the best way of using sound in therapy for hyperacusis?	39		23 14	1		•	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.	
	Does sound therapy help Validation of sound desensitization programmes using either a white noise generator or a hearing aid.		x							
	Is sensitising by the use of sound generators effective? What guidelines are there for setting WNG's?		x x							
				х						
	Does noise enrichment at night improve hyperacusis Are sound renerators effective in the management of hyperacusis in children		x x							
	1) Do sound generators help in the management of hyperacusis in children? Does concern interesting the party hole hyperacusis.		x x							
	on counts wealthin their project doors. In count wealthin the project doors.		x			\perp		$=$ \pm		
	Alternative viable treatments available besides 'white' or 'pink' noise - for example would daily exposure therapy (cafes, bars, Tescos etcl be onescribable for those disliking recorded sounds?								x	
	Systematic study using controls and cases to see if white noise generators or sound therapy in children is effective	T	x							
	Systematic study using controls and cases to see if white noise generators or sound therapy in children is effective		x							
			x							
	or is moderate exocure to exceeder sounds beneficial to enhabilitation in the lone term? What sedemon is there that soins exercators are an effective method of management of beceracuis? What laid of sound threate plates with horizoncisis?		x x	L	<u> </u>					
	How long does it take for a treatment eg auditory desensitisation during the night /noise generators during the day to work?		x							
	Do noise generators improve hyperacusis?		_ x					$=$ \pm		
	De noise generators improve hyperacosis? If seposes theory efficient of the control of the cont		X X		<u> </u>	1 -				
			×							
	Can classical conditioning such as progress introduction to sounds that they feel are intolerable help de-sensitize?				+		_	-+		
	Can classical conditioning such as progress introduction to sounds that they feel are intolerable help de-sensitiae? Can hyperacusis be prevented with sound enrichment programs		x		_	+ + +		-		
	Can classical conditioning such as progress introduction to sounds that they feel are intolerable help de-sensitian? Can hyperscale the prevented with sound enrichment progress Are sound percentage spread on the progress of the progress		x							
	Can dissuit conditioning such as progress introduction to sounds that they feel are installmentals help de-sensitive? Can byperscase in benefit and such and installed progress Ant sound generates proven to help? Why the size of a sound benefit or given the help? The value of count of the size of the sound of the size of the size of the size of size of the size of the size of size of size of the size of size of size of the size of s		x x							
	Can dissert conditioning such as progress introduction to search that they find are instinated while the desired of the place and the process of the process		x x							
	Can dissort conditioning such as progress introduction to south that the field are instituted in high desemblar? Can begreated by precised with could enrich progress Are sound generatory prose to high? Why the use of a sound daring the right more effective titles and sar level device during the day The wall and level through Low conditioning by grant and in-constitution to note engouse hameful to hearing? Low conditioning by grant and in-constitution to note engouse hameful to hearing? Done the end sound generator improved by precision? Once the end sound generator improved hypercost?		x x x x x x x x x x x x x x x x x x x							
	Can dissert confidencing such as progress introduction to search that they fail are instituted in high described? Can beginned by present and the confidencing progress also sending presentar propers in high progress and sending presentation propers in high progress progress in high progress progress in high progress progress in high progress progress in high progress progress in high progress progress in high progress progress in high progress prog		x x x x x x x x x x x x x x x x x x x							
	Can dissert conditioning such a purpose introduction to counch that they find are instituted in high describin? Can be purposed to present the financial mechanic programs. Are sending exercises; present to belag? Are sending exercises; present to belag? Are sending exercises; present to belag? A sending exercises; present to belag? A sending exercises the public processing tolerance to mose segment handful to besing? A sending exercises sending when their time beginning tolerance to mose segment handful to besing? A sending exercises sending when their time beginning tolerance to mose segment handful to besing? Can send segment and sending when their time beginning tolerance to mose segment and tolerance to the sending tolerance to the sending tolerance to the threatment of the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance tolerance to the sending tolerance to the sending tolerance tolerance tolerance to the sending tolerance to the sending tolerance to the sending tolerance tolerance tolerance to the sending tolerance tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance tolerance to the sending tolerance tolerance to the sending tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance tolerance toler		x x x x x x x x x x x x x x x x x x x							
	Can dissert disordinating such as progress introduction to search that the fast and are instituted at high semilarity. Can begreate this proceed with sound entirely temperature or great. While I have been a fast of the semilarity of the semilar		x x x x x x x x x x x x x x x x x x x							
	Can disself conditioning such a purpose introduction to search that they find are instituted in which described? Can beginned by present the final process of the search generating process. As exactly generating points to find a process of the search generating points to find a process of the search generating points to the search generating of		x x x x x x x x x x x x x x x x x x x							
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As any complementary photoclass, yago, medicales, logicallunary) of absention	Can dessert des orderinaries unter a program promoterior to securito hast feet feet and are restricted in region dessertinaries. Can begreate this proceed with count of environment organisms. May a the securit a securitarie dessertinaries experimental dessertinaries and the security of the deg. The security of the		x x x x x x x x x x x x x x x x x x x		1	3	0	0	No selected systematic reviews or guidelines identified. Mislatels up to date or soping review has revealed imposted continuing uncertainties about	Fechani, K., Pringjenci, I., Shekhwari, G. S., Bagulay, D. M., Soreda, M., & Rosan, D. J. (2027). Climit informations for regulations in Adults A. Skoping Roberts States that General Conference of the Conferenc
An any complementary judication, yaga, meditation, hypotherapy) or alternative theoryans (see theory), wheaten therapy) distribute for hypotherapis	Can classed confidencing such as pages pass introduction to search that the fast and are instituted in why discussion? (Exercises passes and exercised with count derivative registers.) In the second of the county of the second of the seco		X X X X X X X X X X X X X X X X X X X		1	3	0	0	to relevant systematic reviews or guidelines benefited. Militable up to-date or surger serves his reviewed impostent continuing uncertainties about waterbase debugs.	Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current
de any amplementary industrian, y ga, multiplies, 'spendentary) or alternative strangers (seen through, wheatien through effective for hypercentar).	Can dissert confidence with a special process introduction to search that they fail are instituted in high sensition? Ear hypercoals by present with build. All confidences process in the high sensitive process. All confidences process in the high sensitive process of the sensitive through the sensitive process of the sensitive through the sensitive through the sensitive process through the		X X X X X X X X X X X X X X X X X X X	0		3	0	0	To selevat systematic reviews or guidelion, iteratified. Mulade up to-date carrier previous his revailed imposted continuing covers have really also assume continuing covers and continuing covers and continuing covers and continuing covers and continuing covers and continuing covers and continuing covers and continuing covers and continuing covers and covers an	Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current
An any complementary (industria, yaga, meditatria, hyposchenga) or alternative therapis (laser therapy, vioration theory) effective for hyposcasio 2	Can disserted confidencing such a purpose protecture to search that the figure day are instituted to high controlle? (In Important part parties and the protection of the controlled contr		X X X X X X X X X X X X X X X X X X X	0	1 x	1	0	0	to release symmetric reviews or guidelines standing the fallotin systematic reviews are guidelines standing accordance about treatment effects.	Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current
As any complementary industries, year, medicales, hypertheology) or alternative Stangers (laser through, observe through dischart de hypercental)	Cen desard confidencing such a purpose prosthection to search that they find are instituted in high controlle? (See Inspermenta presented with pound exhibition and present p		X X X X X X X X X X X X X X X X X X X	0		3	0	0	To release systematic reviews or guidelines shortfled. Middle up to date to character systematic reviews or guidelines shortfled. Solidate up to date to character shortfled middle shortfled shortfled shortfled.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current
Are any complementary pideastron, yage, mediation, hyporotherapy) or alternative thorages (Saer therapy, obstation therapy) effective for hypersecusity.	Cen desard confidencing such a purpose prosthection to search that they find are instituted in high controlle? (See Inspermenta presented with pound exhibition and present p		X X X X X X X X X X X X X X X X X X X	0		3	0	0	Supplement spreader review or guidelines breaklad, haldelin on the data supplement was recorded important continuing uncertainties about supplement effects.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current
Are any complementary judication, yego, meditation, beyondheapy) or alternative therapes (jean therapy, efection through) effective for hyperocausis?	Cen desard confidencing such a purpose prosthection to search that they find are instituted in high controlle? (See Inspermenta presented with pound exhibition and present p		X X X X X X X X X X X X X X X X X X X	0		1	0	0	to relevant systematic naives or guidelines benefited. Notidate up to-date to regard years have readed imposted continuing uncertainties about authorize effects.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current
Are any complementary foliasation, year, moditation, bigocordinary) or abstraction through their flags, discrete through defining for hypercentric flags through defining for hypercentric flags.	Cen deserted confidencing such as propries introduction to search that the fig. and are instituted in this poll are instituted in the poll are instituted in		X X X X X X X X X X X X X X X X X X X	0		1	•	0	To wheat systematic reviews or guideline sizeffied. Malatin up to date supply seview has revealed important continuing uncertainties about Magested effects.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current
Are any complementary (infeation, yegs, neditation, hyperotherary) or alternative therapes (learn therapy, vibration therapy) effective for hyperocasis?	Can desard confidencing such a purpose introduction to search to talk type day or instituted in high controlle? (Exercised proceeding of the purpose of the		x x x x x x x x x x x x x x x x x x x	0		3	0	0	to relever symmetric reviews or guidelines dentified. Reliable syst-date or second improved continuing accordances about teachine of effects.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current
Are any complementary influence, year, meditation, hypochemically or alternative designs; their things, chedien beings; effective for symmetric things; chedien beings; effective for symmetric things; and the second of the seco	Cen deserted confidencing such as propries introduction to search that the fig. and are instituted in this poll are instituted in the poll are instituted in		X X X X X X X X X X X X X X X X X X X	0		2	0	0	to select symmetric review or gladdion identified. Noticits up to date using evices has revealed imposted continuity covertainties about watered offices.	Clinical Interventions for Hyperacusis in Adults : A Scoping Review to Assess the Current

											1
	Does hypnosis improve hyperacusis? Does hypnosis improve hyperacusis?					x					
	One medical inspired lyperacula? One her benefit of the present o		×		1						
	Has any investigation taken place whilst in hypnosis to establish root cause of Hyperacusis	×	<u> </u>								
	Can early assessment and subconscious therapy through hydnoxis held? Could current healthcare be improved by using hydnotherapy	X X									
	How effective are relaxation techniques? How well shot relaxation halfs bonavarisis	x									
h drugs are effective for hyperacusis?	26	4	19	0	0	1	0	2	No relevant systematic reviews, scoping reviews or guidelines identified.		
	Are there any drues to helo Invoeracusis?	x									
	Are there some drugs which could inhibit the pain reaction for people with severe and catastrophic hyperacusis?	×									
	What druss help hoperacusis? Are there any pharmacological treatments for invoeracusis?	x	×								
	Do tricyclics e.e. amitriotyline helo?		x								
	What treatment perscription wise can people with hyperacusis take to be effective? If there's nothing please develope it.		×								
	What improves it? Medication?		x								
	Co. anti-depresents help or hinder? Co. beta blockers help or hinder?		x x								
	Is increasusis treatable with medication? can SSRs help adults with hyperacusis	×	×								
	Does medication improve hyperacusis?	_ ^	x								
	Are there any medications for hyperacusis? What improves hyperacusis? Drugs, supplements, alternative therapies (First noise just made my ears worse)		x								
			- ^					×			
	What drugs can be taken off label to help with hyperacusis today? What pain treatment approaches can help to reduce pain from new noise exposures? Are there moderns that can halp to reduce pain from new noise exposures?							х			
	Are there medicines that can help? Are there any drugs, operations that have shown to improve this condition. Does tranquillisers reduce effect of hyperacusis		x x x								
	Does tranquillisers reduce effect of hyperacusis What medicines can treat the delayed/lasting-pain?		x								
	Credit any drue to be made to treat hyperarysis?		x								
	4. Should potent anti-anoiety medication be used during the early treatment of severe patients to reduce trauma and minimize overshoot in threat assessment?		×								
			x								
	What drugs are used in hyperacusis breatment? Is there are medication to relieve hyperacusis? Does Betahistine help? 7		×								
	do medications that are effective for migraine also help people with hyperacusis 85	12	_		+	×					
educational information and support is effective for hyperacusis?			51	13	0	۰	6	3	No relevant systematic reviews, scoping reviews or guidelines identified.		
	ages all 14th available allows pooling on the frontine to bake active and of low depressed that a part and parcel of professoral stress, the professoral stress and the professoral stress are present to the impact of higherance and several to find the stress and the stress of the s	×	1								
	How can the impact of hyperacusis be easily communicated to raise awareness of this hidden issue information about support is hard to come by and should be made more easily assessible	+	x	-	+-	1		-			
	INFORM THE PATIENT obviously the more information out there the less likely the condition is to become entrenched	×									
	behaviour What is done to raise awareness	×		\perp							
	Now do I useon and case for semione with Invoeracusis? What information is available to parents about hyderacusis?	+ -	1	X X	+ =	$+ \exists$					
	Effective support ideas and written information	×			\perp						
	how do we raise awareness of the condition. Can hyperacusis be reduced by noise prevention education e.e. Motorcross?	X X	<u> </u>	<u> </u>				<u> </u>			
		×			-			х			
	not model to determ to one accelerate feature to it into mass. Better educational inscinctors before an a more accessive understanding of hyperaccess More understanding of the condition. Educated the models: What can be done to educated enably, Founds, detector, coworkers, etc. on the actual severe pain everyday noises such as	_ ^	×								
	What can be done to educate family, friends, doctors, coworkers, etc. on the actual severe pain everyday noises such as chompine on ice or electricity running through a cord can cause?		×								
	chomoine on ice or electricity runnine through a cord can cause? You have said it above . Treatments please , self help techniques , rehab , and support to prevent it being the invisible prison it		x								
	has become for me. Then people to be a concepted consequence in orbital MSHS appropriate inform third and the national information and the contest of the national information and the contest of the national information and the contest of the national information and the contest of the national information and the contest of the national information and the contest of the national information and the contest of the national information and the nat		×								
	There needs to be a concerted programme in school PSHE programmes to inform children of the potential harm they expose themselves to and the likelihood of T and H due to noise factors. I wish someone had told me.										
	Why isn't there any care and support for people with H		x x								
	Do teachers know what Muperiacusis is? A leaflet to give to people with this condition to suggest better coping stratergies. Explaining to people in simple terms how it is caused so that family members can also read the information.		-				×				
	Leaflets in doctor sureeries and awareness fivers/leaflets in hospital audiology departments.						x x				
	would educatine teachers and parents about the effects of pressure on children prevent hyperacusis. Cood. clear and reassurine printed literature needed.	×									
	Standard handouts as it is all very hit and miss according to where you libe There needs to be a good way to educate loved ones so they can understand the problem		x								
			×								
	There should be more literature on the subject, easier to undenstandand more help on a personal basis, not just on line, it makes you feel out off from the world. Basically your told there's nothing that can be doneget on with itis there treatment?		_ ^								
	Yes it should be more understood by healthcare professions , because most people don't even know what it is.		×								
	Should family members go for phsycotherapy to learn how to deal with it? Maybe family member and friends should study a		×								
	little bit about hyperacusis Many people do not understand levels of pain associated with hyperacusis and long term effects. Understanding of the condition is would'do inadequate in my agreeiners in it's hard to find help from agencies including		×								
	who real with children one-ilically with ASD and SLD. there's a huge training near			×							
	Are there some training programs for hyperacusis patients caregives? Why at there no care of support? Why at these no care of support? Wood like to see OP precent informed and made aware of H with a simple information leaflet.		x								
	Wity si there no care of support ? Would like to see GPs properly informed and made aware of H with a simple information leaflet.		x	_							
	Does education about how the ear works remove arodety and hence hyperacusis.		_					х			
	I'd love for this to be more recognised - I work from home as much as I can because I have such trouble working in the normal office environment, was have a notineer and a small hitchen area in our open plan office, this load of namele talking and tuning .		×								
	office environment - we have a printer and a small kitchen area in our open plan office, plus load of people talking and typing - how can you educate people about the issue to explain why this is so debilitating?										
	is there any support? do people know if they have it? or might they just get irritated and blame other people for example	+ -	x x x	×	+ =	$+ \exists$					
	is it helpful for people to know they have it?		×	x							
	I mink, we an know to avoid hyperacusis we need to avoid loud noise however in this day and age proves difficult so yes more information on support and care would be good.		×								
	Will education about over exposure to loud noise help prevent hyperacusis? Education and information resources	+ -	x	+=	+ =	$+ \exists$					
	I think we will know to avaid hyperaccious we need to avaid to during the converse in this day and age proves difficult to yes more information on specific and care would be good. Will reduction about over exposure to load note help prevent hyperaccio? Education and information resources Zhould you that it paing Information assources and provide in Young Age? What advancing the information assources Zhould you that it paing Information assources and there?	1	x x		\perp						
	What education for schools/employers is out there? What information/education is given to GP's and ENT depts on this condition?	<u> </u>	<u> </u>	X	<u> </u>						
	Does for use and price of formation is some a prosition in transp day? All the declaration is confidently included and included in the confident of the confidently included and included included in the confidently included in the confidently included included in the confidently included in co		x		-						
	Should places of work and education be more informed le, noise pollution from background music, announcement systems	1	1		1	1 1					
	and the dynamic level, accoustics, hand dryers, leaf blowers, road diggers, traffic, alarms, loud voices, should there be decibel level monitorine and control? As in air sollution monitorine.		×								
	What helpful information can audologists offer to people affected by hyperacusis? (Information on my hearing aculty is not enough. My hearing is now less in the ear affected, but it is the hyperacusis that is most troublesome in daily life.)		×								
		1			1						
	I have been to ENT and a private audiologist and there was little discussion about hyperacusis and what it was. There should be more patient and staff leaflets. Care should be provided potentially by all staff but possibly different levels of complexity.	×	×		1		×	1			
	permore patient and stam waters. Care should be provided potentially by all staff but possibly different levels of complexity.	1	1	-	1	1					
	on one yearst and user measure, are all could be processed postured by a second sold be reached user to compare the second for the reached by the second for the reached by the second for		×		1						
	Do we need to look at higher education authorities and the way we educate our students on hyperacusis. how effective is simple reassurance following explanation of the nature/opini of hyperacusis and detailed facting including	×	_	_	1	+	×				
	ctoacoustic emaissions and acoustic enferen?	×	1		1	1		1			
	Is it possible to create an assessment that would ensure that we can access tools (such as acoustic tiles) that would reduce the effects of sound within our home environment.			x				×			
			×								
	trypminisms. There can basehers he informed about this condition on that they understand what it fauls like?		x x	х							
	Why don't we enhance the policy about hyperaccious and innivid as regular ways? Why has the work of legislated or the Operaccious and innivid a system of a strike but it having issue and that diventioning, beauting loss is not enough to get project to protect from robot? We must discribe hyperaccious and innivit to the general public loss is not enough to get project to protect from robot? We must discribe hyperaccious and innivit to the general public loss in our south and but load of travers regist our current flowy discribed when having. This will also help the public to more south as our southern design of the control and the hyperaccious from the cross south as our accordance of them our of the host properaction from cross south as our accordance that was not	+	×	1	1	1 -					
	hearing loss is not enough to get people to protect from noise? We must describe hyperacusis and tinnitus to the general		×		1			1			
	purses so max may understand what kind of torture might occur if they don't protect their hearing. That will also help the public be more understanding of those of us that have hyperacusis from other causes such as a car accident that was not		*			1 1		Ì			
	ossventable. How can we be more supportive of the patient and living with their family?	+	×		1	+					
	Now can we be more supportive of the patient and livers with their family? Information for families not work can understand better. Would including awareness of noise-damage to not only hearing but emotional well-being at all levels of education be an		x								
	Would including awareness of noise-damage to not only hearing but emotional well-being at all levels of education be an effective way of preventine hyperacusis and other hearine-related issues.		×		1			1			
	Consult with families so they fully understand the problem.		×		1			-			
	these can the healthcare is written be made more knowledwalled about hypercascial? 3. Can we provide more managed instruction to discissions with the public about those who do not respond strongly to be transmitted with more managed instruction to discissions with the public about those who do not respond strongly to to testimate the source of the public about	1	×		1	1 1					
	treatment without undermining the benefits of existing treatment practices? This is particularly pertinent to those who do not respond strongly to treatment (about 50%). Some of whom are only left with the option of discontinuing work and anywhite for		×		1			1			
		1	1	1		1			Ì		1
	disability. Can byperacusis be prevented by education in schools more prevelently? How to educate people and dicters that has get no close if this disability and they do not believe you even with doctors.		x								

										_			
The state of the s	Could a hearing specialist in year 7 giving a workshop help prevent hyperacusis Can we educate the public about this condition? Are there glass to proade geneate reloci of information advice and guidance to sufferers and medical staff? What would be the best way to suport people so they do not have to make huge adjustments to their lives as a result of			x	 		\vdash		1	1			
	Lan we educate the public addut this condition? Are there plans to provide greater levels of information advice and guidance to sufferers and medical staff?			x					\perp	_	j l		
	What would be the best way to suport people so they do not have to make huge adjustments to their lives as a result of		1		×								
	Involvences like we did/do. Hand divers are the worst for my son - they need to be queter! How would you explain hyperacusis to people in elemenal we have tried but many simply should and seem to think it's nothing.		1		×		1		1	1	1		
	bad belittline the challeness faced doesn't make them so awav! is it important to tell the general public that hyperacusis sufferers suffer physically (real physical pain) rather than				×]		
		i	1	×	1]]	1	×	1	1			
	How can we improve public understanding of the unique pain that people with hyperacusis can experience?			×							j l		
	The unconscious of the original confidence of the unique pain that people with Invoeracusis can experience? What effect does education of young people into the risks of hearing damage, ag from headphones and loud discos, have on pedaction of such damage?	I		×	1					1			
			x								j l		
	There is no care s far as I'm aware. What care should there be?				x x						-		
	How can it be identified and supported more widely?			×	_ ^						i		
	Constitution of a security care I peter find Leafist would be a cool. There is no cares list of in Joseph Cool (and in Joseph Cool (and in Joseph Cool) There is no cares list of in Joseph Cool (and the leaf) There is no cares list of in Joseph Cool (and in Joseph) There is no cares list of in Joseph Cool (and in Joseph) The is not care is a list of in Joseph Cool (and in Joseph) The is not care is a list of in Joseph Cool (and in Joseph) The is not care is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The is not care in Joseph Cool (and in Joseph) The in Joseph Cool (and in Joseph) T	,		×									
	Create greater awareness of the problem.											Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017).	
IU31 Is Tinnitus Retraining Therapy effective for hyperacusis?		6	1	5	0				0	0	No relevant systematic reviews or guidelines identified. Reliable up-to-date scoping review revealed important continuing uncertainties about treatment	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Review to Assess the Current Position and Determine Priorities for Research. BioMed Research International, 2017.	
											effects.	Position and Determine Priorities for Research. BioMed Research International , 2017 . https://doi.ore/10.1155/2017/2723715	
	Can TRT be done without an audiologist?			x x									
	Does TRT help? does TRT based treatment help hyperacusis in the long term.		x	_ ^							†		
	Does TRT really help? Can it make things worse?			x									
	Is Tinnitus Retraining Therapy (TRT) effective? Does TRT, if implemented carefully and effectively, improve hyperacusis?			×							1		
IU32 Is Neuromonics' ^{ss} effective for hyperacusis?	and the first of t	2	۰	2	0	0	0			0	No relevant systematic reviews, scoping reviews or guidelines identified.		
a neutonatela enelure no representa	I spent \$5000 on a neuromonics device that was suppose to elevate my tinnitus. No affection on Tinnitus, but seems to provide		-			-	-	-	-	-	no reteats systematic reviews, stoping reviews or governor outstance.		
	relief for hyperacusis. Why is that?			×]		
	Why use sound neuromonicscwhite noise it does not seam to gelp me only causes to mske it worse			x	_				_	_			
1U33 Are any surgical interventions effective for hyperacusis?		3	۰	3	0	۰	۰	۰		0	No relevant systematic reviews or guidelines identified. Reliable up-to-date	Fackrell, K., Potgieter, I., Shekhawat, G. S., Baguley, D. M., Sereda, M., & Hoare, D. J. (2017). Clinical Interventions for Hyperacusis in Adults: A Scoping Bedew to Assess the Current Position and Determine Priorities for Research. BioMed Research International, 2017.	
Are any surgical interventions errective for hyperacusis?				,							scoping review has revealed important continuing uncertainties about treatment effects.	Position and Determine Priorities for Research. BioMed Research International , 2017 . https://doi.org/10.1155/2017/2723715	
	What improves it? Surgery?			x	L							Impo-gramm#/10.1135/2017/2723715	
	What improves it? Surgery? How does a stapedectomy cause hyperacusis?			x									
U34 Would restoring hearing (e.g. regenerating name relik) improve hungarousis?	uoes uamma xnne cause hyperacusis	2	0	×	-				-	-			
NU34 Would restoring hearing (e.g. regenerating nerve cells) improve hyperacusis?		2	۰	2	0	0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	Would regrowing nerve cells and repairing demyelinated nerve fibers in the cochiea restore the sound tolerance levels?	i	1	×	1]]	1	1	1	1			
	Would regenerating sensory hair cells restore the sound tolerance levels?			х							1		
IU35 Is pain hyperacusis more related to hearing loss than other types of hyperacusis?		3	0	2	0	0	0	1	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	I want to know the mechanism behind hyperacusis with delayed and lasting pain. Or do the tiny muscles in the ears cause this			x	1								
	[like, do they contract and then irritate the surrounding nerves, resulting in referred pain]? Does a lower pain threshold associated with hyperacuses imply a higher probability of hearing loss when exposed to a certain						\vdash		1	1			
	Does a lower pain threshold associated with hyperacuses imply a higher probability of hearing loss when exposed to a certain sound pressure level?	·	<u></u>	×	<u> </u>	<u> </u>	<u>∟</u> ∣	x					
IU36 Can/should there be monitoring or screening for hyperacusis?		23	3	14	4	۰	0	1	1		No relevant systematic reviews, scoping reviews or guidelines identified.		
	Stand for a relation by acting secretion to beliefly hypotentia to predictive audebling clien? Lit generally as the left file secretion for client supposed one trace? All generally as the left file secretion belief secretion for trace? When the Lit good from the left general secretion for the left secretion for the l		×		1				+	+	, and the same of the same of the same of the same of		
	Screening and management plans essential for children.		•		×						į		
	Is it possible to check if the symptoms have improved over time?			×						_	-		
	ts it routinely checked for when people are fitted with hearing aids?			x							j		
	How long if at all should these children be monitored or tested?		×										
	Should doctor's assess family history of those with sensitivity to sounds, lights, smell as a factor of possible signs for getting hyperacusis?	'		×									
	Currently there is no known time frame for reevaluation a person's hyperacusis once being disenosed which cause issues with										1		
	Currently there is no known time frame for reevaluation a person's hyperacusis once being diagnosed which cause issues with accommodation in the workplace, or even being considered for disability, in, fact my doctors per frustrated with all the questions and believe they should only have to diagnose once and not update detailed needs because there is no case.	'		×									
	questions and believe they should only have to diagnose once and not update detailed needs because there is no cure.												
	Can it be picked up in the newborn hearing screening programme				X X				×	_	-		
	is it possible to set up an annual review of a child's hearins? would this ian annual review of child hearins) be of any help to the child?			x	x						i		
	Simply do doctors routinely check for hyperacusis in children and are they sufficiently well informed of externalised behaviours relating to the condition in those too young to vocalise their problem.	'		×									
	nelating to the condition in those too young to vocalise their problem. Is it worthwhile to check for hyperacusis at a young age?	i		x				x			1		
	How can we incorporate a hyperacusis check for children of a young age into regular health routine? Does regular monitoring by sufferers of the condition, through equipment and/or tests provided by the NHS, help to manage it			×									
	Does regular monitoring by sufferers of the condition, through equipment and/or tests provided by the NHS, help to manage it harter?	'		×									
	I would like to see whether regular support and check ups helps people better cope with hyperacusis. All too often people see			x							i l		
	an audiologist but it's a one off and not followed up as a matter of routine.										-		
	As above, would regular intervention/checkups/support help people with hyperacusis. I would like to see NICE guidelines stating how people with hyperacusis should be treated and how often their support should be maintained.	'		×									
	do they need to be monitored.		×							_	-		
											i		
	16kHz). I would like clinicians to be checking children's hearing beyond 4 or 8kHz on a regular basis – whether this is for	'											
	suspected hyperacusis, or suspected hearing loss in the higher frequencies that might affect how they hear certain sounds. I	'											
	hear to 20 kHz or higher. High pitched noises (15 – 20 kHz) exist in many places, e.g. electrical goods, projectors in school	'		×									
	classrooms, fluorescent lights, loud animal deterrents, monitoring tones around 20 kHz in Public address systems. Some	'											
	people, especially children, may be particularly sensitive to these sounds. There are two issues here: People are often not aware that these high tones exist in places — e.g. audiologists would not be aware of high frequency tones in a child's	'											
	classroom. As people often do not have their hearing, or LDLs, measured beyond 8 kHz, if someone has low LDLs in high											1	
	classroom. As people often do not have their hearing, or LDLs, measured beyond & kHz, if someone has low LDLs in high frequencies (e.g. 15 kHz) this might be missed.	l											
IU37 Can early diagnosis reduce the risk of hyperacusis getting worse?	I read like (colorism to an whether people regarding and from noot the particularly too (25.4 in this filt beganner in the particularly too (25.4 in this filt beganner in the particular particularly too (25.4 in this filt beganner in the particular part	7	2	4	1	0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
IU37 Can early diagnosis reduce the risk of hyperacusis getting worse?	Early warning to take action	7		4 X	1	0	0	۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
1037 Can early diagnosis reduce the risk of hyperacusis getting worse?	Early warning to take action how early should they interverse with management	7	2 X	×	1	0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
637 Can early diagnosis reduce the risk of hyperacons getting worse?	Early warning to take action those early should they interverse with management two can a principle evaluated before hyperacosis is a permanent problem	7		x x	1	0	0	۰	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
INJ27 Can early diagnosis reduce the risk of hyperacusis getting worse?	Early warning to take action that any should they internet with management two any should they internet with management two any should they internet with prescription is a permanent problem (See by prescription) for greateful by early treatment before regions pathway in actioned? Coal byprescript or of or prescription prescription in a permanent problem Coal byprescription or of or prescription profits in a permanent problem.	7	×	×	1	0	0	0	0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	Early warning to take action those early should they interverse with management two can a principle evaluated before hyperacosis is a permanent problem	7		x x	1 X	0	0	0					
	Early sweming to take action how early should flow interies with management true or a person in souther foliation for hypersonic in permission problem (Cen linguration) be presented by early hypersonic in permission for hypersonic in the control of the control	7	x	x x x	1 X		0						
1077 Can parly diagnosa neshaci the risk of hyperacush getting some? 1088 What is the natural history (cosed and changes over time) of hyperacush?	Early exeming its lake action. There also ploud they increase with management than early bound they increase with management than early process of the control of the cont		×	x x x	x						No referent systematic molene, scoping reviews or guidelines identified. No relevant systematic molene, scoping reviews or guidelines identified. No relevant systematic molene, scoping reviews or guidelines identified.		
	Early exeming its lake action. There also ploud they increase with management than early bound they increase with management than early process of the control of the cont		x x	x x x	X S								
	Early exeming its lake action. There asky should they increase with management than early should they increase with management than it as peace for exemine the first hypercounts a parameter problem. There are a parameter increase the first hypercounts and the parameter increase of the control of the con		x x	x x x	x								
	Early exeming its lake action. There asky should they increase with management than early should they increase with management than it as peace for exemine the first hypercounts a parameter problem. There are a parameter increase the first hypercounts and the parameter increase of the control of the con		x x	x x x	X S								
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	Early aversing to take action that early should they increase with instagement that are any should they increase with instagement that are any should they increased in a parameter problem Contil assessment and are all any interested by any interested any any interested any any interested any any interested are administrated. Contil assessment and or all processing continuous and any interested are referred to an indistinguish Contil a Marke hours proceeding-indisent of resignity and select 1.3.1 Designet or approximated? Contract Should hope processor or are any low for with of? Contract processing contracting and interested and hypersona. What compare has defined interested and hypersona. What compare function is a market to exclude the processor, a clean further own or the order propriet along the contract interested and interested and hypersona.		x x x x x	X X X X X Z Z I	X S								
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	Early among to the action and a segretary in equation of plants appeared to the control of plants appeared		x x x x x x x x x	X X X X X X X X X X	x 5 x x x					2			
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	Early seeming to table action These early fived of they increased with miningeneral Continuous and the continuous and miningeneral Continuous and the continuous and miningeneral Continuous and the continuous and miningeneral Continuous and the continuous		x x x x x x x x x	X	X X X X X X X X X X X X X X X X X X X					2			

1	1	Are there any patterns in how it progresses? What is the natural progression/progresses?		x					3	I	Í
		What is the natural progression/progressis? 1. Association between Hyperacusis and other childhood developmental disorders including autism	x x								
39	What is the prevalence of hyperacusis in a general population and other specific populations (e.g. people with autism, mental health issues, learning disabilities, hearing	42	12	21	2		2 1	4	No relevant systematic reviews, scoping reviews or guidelines identified. Relable systematic review has revealed some evidence of prevalence in children but needs updating.	Rosing, S. N., Schmidt, J. H., Wedderkopp, N., & Baguley, D. M. (2016). Prevalence of tinritus and hyperacusis in children and adolescents: a systematic review. <i>BMJ Open</i> , 6 (6), e010596.	
	post)s.				_				children but needs updating.	systematic review. BMI Open , 6 (6), e010596. https://doi.ore/10.1136/bmicoen-2015-010596	
		is it a widescread enough condition to be recognised in the public domain and taken seriously? Is there a areater incidence of people who have a sudden loss and hyperacusis.	x x								
		What % of the oppulation is affected? Need better epidemiological information as it is still unclear as to how many people are affected.	×				x		∃		
		How many people have given up going to the pub, restaurants because there are so many children screaming and being allowed to by their parents, or loud selfish adults with no volume control. Sometimes the pain is so bad I just leiew.	×	×							
				x				-	-		
		What is the suicide rate for people with hyparacusis? How often do people who work in loud settings get hyperacusis?		х							
		What percentage of those suffering hyperacusis also have chronic inflammatory response syndroms(CRS)/biotoxin lilness, a genetic condition affecting up to 25% of the population, depending on exposure to water-damaged buildings, lyme and/or algee toxins, where sensitivity to sound, light, etc. are known symptoms(efficient).		×							
		algae toxins, where sensitivity to sound, light, etc. are known symptorm/effects? What percentage of people with hyperacusis have elevated GAD-65 anti-bodies which can effect GABA neurotransmitters and							_		
		what precentage of people with hyperaculas have elevated GAD-OS anti-dopies which can emect GADA neurotransmitters and make things husen-excitions? What are the percentages of comorbidity across these 3 conditions (Inverseusis, hearing loss and timpitual?		x					_		
				×							
		What at the save distributation or sufferen? Can the Intersee the save and solars deal to health frompassicien? Is at a condess for children or unciliarized heavies loss (don't brown where sound cominer from) Is at seen more other in children with intersine difficulties (and in autien) Is it seen more other in children with autien.		×				×			
		Is it seen more often in children with learning difficulties (and in autism) Is it seen more often in children with autism						X X			
		Now common is it among children with learning difficulties? Lot of research is needed in this area in children as the prevalence of hyperacusis is increasing and we still don't understand						×			
		why some children get it and why is it severe In only certain groups like Autism and better management options	×								
		Is theorizonals more common in cecode who suffer with anxiety or stress related mental health problems? Are there some encode of encode who have more chance of developine it than others?	×	x							
		how common is it? Why, after beine in a loud environment such as close to a speaker, does one person come away with timitus and hyperacusis		x	×						
		whist others are unaffected? Does frameransis land for an increased risk of suinide?	×	x			_		-		
		base common is i? White, part braining is a boold environment such as close to a squeler, does one person come away with Sentha and Tryperacuois what cether are usualfacted? Once Inventorial lands in morecasted risk of suicide? Olithorum site market in more research risk of suicide? Olithorum site market are and suicide and the suicide and the second risk of the consideration of Imperacuois with site are? White is the research exists and will foots because for any of the second risk of the consideration of Imperacuois with site are?	×						1		
		What is the crevalence with and without hearing loss? What is the crevalence of persons when throse recursi? Is it more common in people with hearing damage?	×						7		
		Is it more common in secole with hearing damage? How often does it affect only one ear? (An audiclogist told me it is usually bilateral, but mine is in just one ear.)		×					1		
		Why, out of 100 people exposed to the same loud noise (e.e. 100dB), do only a few people set hyperacusis?					×		1		
		2) how common is recruitment at cochlear level as assessed by otoacoustic emissions failure but near normal/normal behavioural hearing assessment in children presenting with increased sensitivity to sounds?	×						_		
		Is hyperacusis more prominent with people who work in loud settings? Is hyperacusis common for children born with autism?	 	x					∃		
		What percentage of the population have ever heard of Hyperacusis? I have never been formally assessed for Hyperacusis. I wonder what proportion of sufferers have been?		x	×				-		
		white do children and the parameter of t	×	x				_	7		
		now many patients are born with this disorder? How many patients are born with this disorder? How much intrusive notice is prevalent in nurseries, schools and places of work?		x			x		7		
		How much intrusive notes is prevalent in insreries, schools and places of work? Is it more prevalent with certain co-morbidities At what age is it likely to be identified as a problem? I only was identified as deaf in my 40s.		X				_	7		
10	Is there an association between hearing loss and hyperacusis?	At what age is it likely to be identified as a problem / I only was identified as deaf in my 40s 41	4	27	1	0 1	4 2	2	No relevant systematic reviews, scoping reviews or guidelines identified.		
		the state of the between words down and beautypid		x							
		Does harring cause hyperacusis? Does hyperacusis celly affect those who have nerve deafness?	×				x		1		
		If so, does the degree of deafness, make the sensitivity worse ? Mow is MA related to hearing loss?		×			x		∃		
		How is MA related to tinritus? Is there a causal link between hyperacusis, hearing loss and tinnitus?		x					-		
		Can it be triggered going deaf to high frequencies? It homeograpis listed to represent hearing Insc?		x			_	×	7		
		Don't hyperison shot yiffed those with his are one defined?		x				_ *	1		
		In investigation oriminate caused or rock of sensory heir cells, or by loss of nerve fibers and nerve cells? How lone does it take to start setting the symptoms of hyperacusis following sensorineural hearing loss?		×							
		Does h indicate hearing loss? What is the association between hyperacusis and hearing loss?		x					<u> </u>		
		Is invoeracusis a system of hearing loss? Is invoeracusis the result of clamage to the ear (e.e. inner hairs)?		x x							
		Is hyperacusis the result of the brain 'turning up the volume' too much - i.e. over-reacting - to hearing damage or hearing loss?		x							
		Is hyperacusis more commonly associated with certain types of hearing loss e.g. cookie bits or reverse slope		х		×					
		Does hearing loss cause hyperacusis? Does hyperacusis occur for persons with normal hearing as well?	x	_							
		Does hearine loss cause hyderacusis? If you find yourself with hyperacusis, does that mean you have suffered from permanent noise damage in some way or		x					1		
		another? Why do most people who set hypercusis from loud noise not have detectable hearing loss?					×				
		Is increased sensitivity to noises advance warning of the onset of deafness Is it linked to hearing loss,		X X					1		
		Do we have malformations in the ears? Is it the hair cells or the nerve cells that is causing H		x	×		×		∃		
		Connection to hearing loss; Tinnitus & deafness seems to have heightened my sensitivity to noise - is this usual?	×					х	-		
		Char treating even mild hearing loss lessen the chance of developing hyperacusis? Does hearing loss cause hyperacusis?		x			_		7		
		Coss harang fors cause hyperacusis? Does hidden hearing fors cause hyperacusis? I haven't heard of hyperacusis before but have always had an intolerance to certain noises. I assumed it was related to my	×					_	7		
		lifelong single-sided deafness. Could this be the case?		x					4		
		Is dealness relevant to hyperacusis? Any human hearing system gets worn out (hearing loss) over time as a result of ageing and exposure to sound, is this		x			x		1		
		degenerative process any different for hyperacusis sufferers? Is it useful and scientifically accurate to tell a young person having this disorder that he/she is far more prone to hearing loss.		×			×	+	1		
		than others? Does age-related hearing loss exacerbate the condition?		×					∃		
41	is peer support (e.g. support groups, mentors, families) effective for management of	Does the loss of hearing accelerate the cossibility of having hyperacusis?	 5	1 1	1		1 0	-	No relevant systematic reviews, scoping reviews or guidelines identified.		
-1	hyperacusis?	do support groups work?	x	1	1		. 0	0	no reverant systematic reviews, scoping reviews or guidelines identified.		
		on support groups work: Support group reaches 2) Is support and care provided by support groups more effective than care provided by professionals?	×				_		7		
		Do those who experience Hyperacusis benefit from attending support groups?	×					_	7		
		Students that I have had become quite isolated and struggle to cope at times. Information on coping strategies would help them. Even self help group therapy to share experiences with others would help a great deal.					×				
		Should they have a sonsion/mentor that had suffered from it to help them through? What can fermine / significant other do to help?		×							
		What can tamilies / significant other do to help?	×		×				1		
		What about having neonic with innufated lived consigns of tags in the local community halo selectes conscitation at 2			2	0 0	3 4	^	No relevant systematic reviews, scoping reviews or guidelines identified.	1	
42	What are the most effective and acceptable strategies to raise awareness about	What about having people with knowledge/lived experience/carer in the local community help educate organisation etc?	,	31							
42	What are the most effective and acceptable strategies to raise awareness about Interactions?	what about having people with knowledge/lived experience/carer in the local community help educate organisation etc? 42 Ans CPs sufficiently aware of the problem, to refer patterns for assessment or indeed do auditologists generally ask patterns.	2	31	2		×		NO researct systematic reviews, acoping reviews or galdennes identified.		
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42	What are the most effective and acceptable strategies to raise awareness about becomessed?	What allowed having paughs with broandings/lived experience/carer in the local community help educate organization etc? 42 Ann CPs sufficiently passes of the problem, to refer parliams for assessment or indeed do auction/gains generally ask parliams auctions administration assessed. Ann CPs sufficiently passes of the problem, to refer parliams for assessment or indeed do auction/gains generally ask parliams auctions and according to the prophers of noise which cause it and which care it and	2		2		x x		NO RESPONSE SYSTEMATIC FORMERS, SCOGLEG FORMERS OF GLICIERINGS INSPECTIONAL.		
42	Other are the most effective and acceptable distinglist to raise awareness about horizontain. ²	what alloud having people with broadingly lived experience/care in the local community help exhicate organization etc? 42 As CPV sufficiently wave of the problem, to refer potents for assessment or indeed do auditinging generally ask patients auditions. Admit statisticity to board. And CPV sufficiently wave of the problem, to refer potents for assessment or indeed do auditinging generally ask patients auditions. Admit statisticity to board. And CPV sufficiently asked problem for a understanding of the types/best of noise which cases it and which sufficient statistics. Sufficient statistics. And CPV sufficiently success to the control of the sufficient statistics. The control or as a what were to be fittedly despendently beautiful propriets quantition.	2	31 X X	2		×		NO PROPERTY SYSTEMATIC PROCESS, SCORING PROMONE OF GLOSENING CHETTERISE.		
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U42	Jameseit	What allow having puople with homologicylined experience/pairs in the local community help electric organization etc? 42 An CPs sufficiently waver of the problem, for rather publishs for assessment or included de auchidagins generally ask patients for assessment or included a such deposition of the supplement of the supplement of raises which cause it and which submit all the surplement assessment of the probleme fin an indenticationing of the spepidement of raises which cause it and which standed like a sent more assessment with the included in the case of the supplement of the specific case in the supplement of the specific case in the supplement of the specific case in the supplement of the specific case in the specific case i	2	x x x x x x x x x x x x x x x x x x x			x				

	More awareness and what treatment is best, if any How can Ops,chool s and Hr/s be better informed about hyperacusis to make the referral in the first place.? In my experience			x						
	How can Gps,school s and th's be better informed about hyperacusis to make the referral in the first place. 2 in my experience these agencies have known little about hyperacusis until i have informed. Can employers, businesses and public authorities be made more awars of suffering likely to be caused by certain practices,		x							
	Can employers, businesses and public authorities be made more aware of suffering likely to be caused by certain practices, designs or policies? Examples include loud tannoys on platforms, screechy train rails, loud hand drives and warnings for fine			x						
	della									
	Why aren't musicians tauaht about potential hearing problems (such as hyperacusis) from a young use?			x						
	Why aren't there more ENT practitioners and Audiologists who are fully educated and informed about hyperacusis?			x						
	How do we inform society that a lot of noise levels we are exposed to on a daily basis are not a healthy level?			x x						
	How can people be made more aware of hyperacusis? How can all medical clinicians be informed about hyperacusis so it can be more readily diagnosed?						x			
	Basined assertments of the conditions. Again, a raising of swereness amongst medical staff. After seeing two GPs and an audiologist, all three have had to speak to colleagues as they have never come across anything bile this before. Besearch that gives medical professionals more of an understanding of what it actuals it also to uffer from the			x						
	colleagues as they have never come across anything like this before. Research that gives medical professionals more of an			×						
	understandine of what it actually is like to suffer from this									
	Spreading awareness is very important but how do we keep scams and unhealthy practices for prevention from spreading?			×						
	Not enough written information. How much understanding do primary care team have of hyperacusis. GPs have nothing to			x						
	Not enough written information. How much understanding do primary care team have of hyperacusis. GPs have nothing to offer regards advice, so have to anxiously wait for appointment with ENT or audiology services.			*						
	Why is this condition not recognised or treated by most audiology services and not recognised by GP's despite it being so			×						
	debilitating How can general public awareness of hyperacusis be raised so that it is de-stigmatised. What I mean is that I am frequently									
	treated as though I am strange because I cannot tolerate certain levels of sound. More awareness and tolerance from others			x						
	would help. A great deal needs to be done in reaching out to schools, employers, and families to advise them how to provide the best.									
				×						
	succort. Could health services be improved by letting all specialists know that hyperacusis exists? Some specialists don't even know above it and attribute it to assister.			×						
	about it and attribute it to assists. Why are disability accommodations made for the deaf (loud notifications) and never for those with hyperacusis?			×						
	There must be lots of people like me who suffer from, yet have never heard of hyperacusis. How can we raise awareness?			×						
	Why do audiclosists not understand what hyperacusis is and have no understanding on possible treatments?			x						
	Why so little publicity? How can we set clinicians to take it more seriously and view it as a condition that needs treatment?			×			x			
	How can we set clinicians to take it more seriously and view it as a condition that needs treatment? Again, improving recognition by GV and others that this is a condition that needs treatment What is the awareness of the condition in Primary Care?		×				x x			
Does avoidance of sound improve hyperacusis or make it worse?	The same of the Constitution of Printing Care	82	14	56 3	0 2	0	2 5	No relevant systematic reviews, scoping reviews or guidelines identified.		
over anvalance or sound improve hyperacusis or make it worse?	Does wearing filtered ear clues help a ox?	**	14 X	3	· 2		. ,	no revenue systematic reviews, scoping reviews or guidelines identified.		
1	Loss avoiding noise worsen pain, distress, or the severity of hyperacusis?		x							
	Soon smellin intrinsion and south and south of the secretive of hypersonality. Dots a continue, more secretime and softens on the secretive of hypersonality of south of the secretive of the se		x							
	Can health service provide ear plugs as the norm for all patients as a precaution when undergoing certain diagnostics or treatments.						×			
	Should a M person habitually wear ear plugs went out?						×			
	Meditimes. Should at a person habitually wear ear plugs went out? Can having conservation methods help prevent hyperacusis? do ser definedrs make worse?		×	 	+ + +					
			x							
	Should people consider additional ear protection in everyday life, in the same way that sun glasses protect eyes?						×			
1	What can be done to protect people's ears from (clearly) excessive volumes through personal headsets? How do you tell when you should wear hearing protection, if everything sounds loud over time?						x			
	How do you tell when you should wear hearing protection, if everything sounds loud over time?			x	-					
	Does using quieter household equipment and cars help hyperacusis? Does avoiding exposure to loud sounds help prevent hyperacusis?			x						
	Or does avoiding loud sounds make it worse?			x						
	Awareness of overprotection and underprotection of the ears. Would ear protection in an MRI have prevented this?			x						
	Would get protection in an IMB have prevented this? Why are there so few effective management tools -i.e. custom earplugs not very effective, in-ear foamies plus over-the-ear ballistic mulfs, helps, but not enough in seme situations. I couldn't tolerate the testing for fitting hearing aids to block out									
	ballistic muffs, helps, but not enough in some situations. I couldn't tolerate the testing for fitting hearing aids to block out certain frequencies.			x						
	Does the constant wearing of earphones particularly for long periods of time or increased volume cause hyperacusis?			x						
				x						
	is the use of ear defenders recommended to belo with remotion control? Do set clears held prepared further hearins loss when acute anset histories? What decide hewest are just to injust to be around??			x	x					
	What decible levels are just too high to be around?			×						
	Is there proof that overprotecting exacerbates hyperacusis? Is over-protecting my ears actually making my hyperacusis worse?			x						
	When am I overprotecting my ears?			x						
	When am I over-protecting my ears?			×						
	Mow to manage the correct use of hearing protection in a severe hyperacusis scenario? What is too much and what is too little?									
	Can hyperacusis be prevented by isolating yourself from all sounds long term? Does avoiding everyday sounds help rehabilitate the auditory system and restore sound tolerance level shortly after hyperacusis.			x						
	onset,			×						
	When am I over-protecting my ears?						×			
	Is over-protecting my ears actually making my hyperacusis worse? Which do are too loud?						×			
	By building in "cut off" feature (immed switch off if loud sound above certain level detected) into headphones?		x							
1	How to soviel total disportion of life due to extraneous sounds			x						
	How to soviel total disportion of life due to extraneous sounds		x							
	How to soviel total disportion of life due to extraneous sounds		x	x						
	How to avoid total disruction of life due to extraneous sounds air protection from loud noise Can hoveracusis be prevented by avoiding exposure to loud sound? Do our defenders make hoveracusis worse?			x						
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	man to see stated throughout the office of the text and secons results Can home cannot be considered by second contents of the state of the contents of the co			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
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	Size to the content that discussion of the first is not an extension security. Less horseconds the content of			* * * * * * * * * * * * * * * * * * *						
	Size to the content that discussion of the first is not an extension security. Less horseconds the content of			1						
	some to see set total discussion of the first text and secons results Can horse count total discussion of the first text and secons total Can horse count to the second of the county of			1						
	Size to the content that discussion of this data is an elevent south. Les horses with the content of the conte			1						
	some to see set total discussion of the first text and secons results Can horse count total discussion of the first text and secons total Can horse count to the second of the county of			1						
	Each transaction of miscretization of this field and the activations to temporary and activated interest transaction of the miscretization and the activation of the activatio			1						
	Each transport transf discussion of this first is necessary to the contract transport									
	Size to the content that discussion of this data teacherous reunds. Can become with the content of the content									
	Each transport transf discussion of this first is necessary to the contract transport									

			3			0					
45	is stress management effective for hyperacusis?	Mose should I habbase to senid stress from sound?	1	۰	3 X	0	0 0	٥	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.	
45		Mow should I behave to avoid stress from sound? Can it be crevented by stress management?			x						
	is hyperacusis a symptom, a condition or a disability?	approximate transcription comp common sycaption and	12	0	10	0	0 0		1 1	No relevant systematic reviews, scoping reviews or guidelines identified.	
- 1		How can people be convinced I'm not making this up or am mentally ill? I'm in constant pain.			x						
		How much of a 'handicap' is it? Should veteran's with hyperacusis receive a disability rating for it?			×				×		
		Why is in not treated as a serious disability. Could hypersocials be enceptied as a disability? Find why the race and gay equality law is observed with quasi-religious real, while disability and age: equality law is ignored. Including for hypersocials, for people with deafferss, and for people on a scale who are distressed by intrusive noise being missed without creamed.	—		x x						
		Find why the race and gay equality law is observed with quasi religious zeal, while disability and age equality. law is ignored.							×		
		Imposed without consent. Can this be recomised as a disability?			×						
ļ		Can this be recommend as a disability? Not classified as a disability. It should be People with Hyperacusis need proper acknowledgement similar to other disabilities such as deafness or physical incapacity so			×						
ļ		that employers and the benefit system recognise the problem. At the moment there is little awareness of the effects on	[×						
ļ		everyday life of sufficers. They are often seen as faking! Is hyperacusin a symptom of different disorders? Could current habithcare services be improved by turning off all the music in waiting rooms? And by not exposing hyperacusis.			×						
ļ		Is hyperacusis a ymptom of different disorders? Could current habthcare services be improved by turning off all the music in waiting rooms? And by not exposing hyperacusis patients too loud sounds? I would like to see hyperacusis recognized as a serious medical disorder, with appropriate			×						
ļ		passens too look sources. I would like to see hyperactuss recognized as a sentius medical discrete, with appropriate insurance coveraire. This condition being fully recognized by local health authorities and available treatment i.e local clinics for treatment and									
		This condition being fully recognised by local health authorities and available treatment i.e local clinics for treatment and support around.		<u> </u>	×						
46	What is the level of public/employer awareness of hyperacusis?		11	1	9	0		1	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.	
\neg		Is the condition well known in all areas?			х						
ļ		why is it such a secret - my father must have had it but never knew and there was no information so he just got upset at noise.			×						
ļ		Public understandine of this disorder thow many people in the general community are aware of this condition and so able to accommodate sufferers for example in			x x						
ļ		Chemas and notive restaurants? Why is the public health field so had about educatine the public about the dancers of noise?			×						
		Are schools and other public organisations aware of the soundscape in their environments and the types of changes that could be made to alleviate symptoms in sufferers and mitigate loud and potentially damaging sounds such as school belis.	1		×						
ļ		be made to alleviate symptoms in sufferers and mitigate loud and potentially damaging sounds such as school bells. Are people aware that sufferers need far more hearing protection than others?	+		×			×			
ļ		How many people are aware of it ? I now realise that I have had it but didnt know it was a recognised condition.			×						
ļ		Where are the was in awareness and information?			×						
147	What should be the maximum volume (e.g. in movies, concerts, headphones) to	is it widley known and understood by the general population?	18	- ×	15		1 0	+ -			
u .	accommodate people with hyperacusis?	How can we persuade restaurants/coffee shops and shops to turn off background music?	18	1		1 X	1 0			No relevant systematic reviews, scoping reviews or guidelines identified.	
ļ					x	-		1			
ļ		There is now an extremely wide range of sound-level produced by MRIs having the same Tesla rating; some, such as GE Silent Scan and Siemens Quiet Suite land to some extent. Tookiba with Planissimo technology purport to review sound levels by 20.	ı	1				1			
ļ		Makes one seatests. Ingermeines, being self-get bei	l	×			x		1 1		
ļ		has to call the radiology tech at each facility). Should it be easy for the public to determine what machines are used by each	I	1			^	1			
ļ		Tachity! (Perhaps there are regulatory issues or the manufacturer forbids the facility from disclosing the exact model, though they sometimes do disclose who the manufacturer is)	l	1					1 1		
ļ		I got hyperacusis from an MRL Why didn't the tech know about ear damage from a loud sound event? Can laws about loudness in different fields (at work, in stores, movie theater, restaurants, every where) make a difference on	—	_	×						
ļ		the prevention of hyperacusis?			×			1	\perp		
ļ		Could hyperacusis be prevented through tougher laws regarding noise levels at movies, concerts, etc? I would like to see more legislation of volume of noise in all areas of life. How can we make the world aware?		+	×			1			
ļ		S.Can anything be done about Dyson and his road drill hand dryers IIIII			x						
ļ		How can you avoid hyperacusis? Bring the noise levels down everywhere such as pubs, cinemas LEGALLY. Investigated few years ago on Health and Safety and they had allowed the . db to be highered. I feel if the Queen had it a cure would be found!	[×						
ļ		Brine the noise down in public areas, constant music in shops malls restaurants etc.			x						
ļ		Brine the noise down in public areas, constant music in shoots malls restaurants etc. Could there be lessibilition to control noise levels? Could doctors suggeries have quietre bells and between cover the tannoy for the next patient? (I went there for an appointment			x x						
ļ		Gold dischorts segerin have guiser helds and bisopers over the tensory for the nest parient? It want there for an appointment and intends had been held section and the section has counted on the nest beautiful control. As the school of the section of noise levels from sexplicit must chapter to the public veloce defect at homeocone.	+		×						
ļ		Is there a case for implementation of a noise-reduction policy similar to that relating to air-pollution			x						
ļ		Would a legally enforceable reduction of noise levels from amplified music/speech in places accessible to the public reduce effect of hyperacusis.			x						
ļ		Should maximum exposure guidelines for those with hyperacusis be based on guidelines for normal hearing individuals or have a particular stability to the property of the	[
ļ		1. Should maximum exposure guidelines for those with hyperacusis be based on guidelines for normal hearing individuals or based on patient setback history, disconfort/pain thersholds, and risk of repeated ownwhelming stimulus leading to chronic pain and maintenance of hyperacusis Coldients for normal having patients are based on permanent hearing loss and not on the complicated underprinting of hyperacusis progression.	[×						
ļ		the complicated underprinnings of hyperacusis progression. Can we get them to turn the music drawn in stores and movie theaters?	——		×						
148	What preventive measures (e.g. educational information, warning labels) reduce the ris of hyperacusis developing or getting worse?	sk	48	10	33	2	1 0	۰	2 0	No relevant systematic reviews, scoping reviews or guidelines identified.	
\neg	- representation of the second	Yes. How can someone avoid the onset?		x x							
ļ		Can hyperacusis be prevented by better guidance re aural care. If we had greater knowledge about why Hyperacusis emerges this would inform the types of prevention required.		×							
ļ		what measures can be taken to avoid its order. What is the best protection against hyperacusis.									
ļ				x x x							
ļ		Is there any way to prevent hyperacusis other than avoiding loud noises?	—		x x						
ļ		Can hyperacossis be prevented by wearing ear protection in load environments? If we find an association with CRS, does increase knowledge of the health dangers of water-damaged buildings (or lyme or alread buildings) and the province of his province or already had onewent the development of hospiracosis and other health effects?			×						
		If we could find a common cause then education could help		×	x						
ļ		How can I prevent my hyperacusis from settine worse? Mow can hyperacusis be prevented?		x	×						
				+-	x x			+ =	+		
- 1		Can horezcoul be convented to not securine hearing disman? Can horezcoul be convented by confection you having? You can it be crewnited? Those can it be crewnited? The los first assertion how GAN horezcouls be convented? How can children be severed from developent horezcouls? Los can children be severed from developent horezcouls? Los can children be severed from developent horezcouls?			x			1			
		How can children be prevented from developing hyperacusis?			x				+		
		can you reduce precedence through environmental / educational interventions s there a specific "excise" for developing hyperacusis and if so what is in those can people avoid it? those to precede it?			* *		 	1			
					- *						l.
		How to prevent it? Can hyperacusis be prevented by knowing triggers and being educated about causes?			x x						
		Itoxus a acesses R? Can hosperscuis be prevented by knowing triesers and being educated about clauses? Can hyperscuis be prevented by exposure to sound Can use of ser protection in only environments halp prevent hosperscuis?		x	x x						
		Totar to account R? Can homeracciab be prevented by knowing trimers and being educated about causes? Can hoperacciab be prevented by apposure to sound Can hoperacciab be prevented by apposure to sound Can so of early protection in noisy weremoments bulg prevent hyperacusis? Once professional treatment has finished, what can t do to ensure it doesn't happen again?		x x	x						
		tions to account E? Cash horsemous his convented box knowless frameway and before educated about course? Cash horsemous his prevented by register to incord. Cash horsemous his prevented by register to incord. Cash horsemous his prevented by register to incord. Control of the control of		x x	x x x						
		These is consent 2. The consent 2. T		x x	x				x		
		Size to consort 2.7 Let a bosenical 2 be extracted by instinct places and briter shicked all doct access? Can use first protection in noise instinancement help greated byper social? Descriptions of them has finished, when can be some at dearn't hopper agen? And if no loss one are now acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to higher acceptable to the social proper		X X	x				x		
		And made also in the restriction in a control or reference from the restriction and control or restriction in the restriction of the restriction o		x x	x				x		
		Can beginned be generated if a primary to send? Can and feer publishes now promotional being primary large groups and a contract of the contr		x	x				x x		
		And made also also determined an initiative relative desirates and cases and		X	x x x x x x x x x x x x x x x x x x x				x		
		And make a contract to the contract of the con		X X	x x x x x x x x x x x x x x x x x x x				x		
		The magnetic design of the control o		X	x x x x x x x x x x x x x x x x x x x				X		
		And make a contract of the con		X X	x x x x x x x x x x x x x x x x x x x				X		
		The majoritude of the control of the		X X	x x x x x x x x x x x x x x x x x x x				X X		
		And make the control of the control		X X	x x x x x x x x x x x x x x x x x x x				X X		
		The theoretical is premised for, desired in steady. Construction is the construction of the construction		X X	x x x x x x x x x x x x x x x x x x x	x	x		x		
		The management of the control of the		X X	x x x x x x x x x x x x x x x x x x x	x	×		X		
		And made also also extended and installer areas on the second and an account of the second and account of the second and account of the second and account of the second account		X	x x x x x x x x x x x x x x x x x x x	x	x		x		
		Cell Supervised In generated By entire to secured. Cell and of the profitation in consequent and the secure of th			x x x x x x x x x x x x x x x x x x x				x		
9	Mer there centum paracolally tools in those proces to hypersocials?	The interest is presented in present a standard of the control of	4	X X X	x x x x x x x x x x x x x x x x x x x	x x		0	x x x	So solecant systematic rentures, scaping rentures or guidelines bland bland.	
9	or these contain personality stabs in those prove to hypercoscis?	The interest is presented in present a standard of the control of	•		x x x x x x x x x x x x x x x x x x x			0	x x x	the solement systematic contents, straping reviews for guidelines shouthless.	
79	on there contain personality trads in those prome to hypersocials?	And made also also extended and installer areas on the second and an account of the second and account of the second and account of the second and account of the second account	•		x x x x x x x x x x x x x x x x x x x			0	x x x	No salement systematic rookens, soziaping rookens or guidelinous identifieds.	
		The Repetition Is generated by many than the second control of the		2 X	x x x x x x x x x x x x x x x x x x x	0	0 0				
	Are there contain percentally traffs in those grows to hypersocials? Can notice expension conce hypersocials (in make it works)?	The Repetition Is generated by many than the second control of the	4		x x x x x x x x x x x x x x x x x x x		0 0			No nitracio apparatori centraca, scoprag centraca se gashirinan khasilikad.	

	If so what type of noise is more likely to initiate hyperacusis? 2) Here noise exercisors raises hyperacusis	×	\leftarrow					-	-
	I) does noise exposure cause hyperacusis Does noise exposure cause hyperacusis? Does noise exposure cause hyperacusis? Does short-term (eq.4-hours per week in a nightclub) exposure to loud noise cause hyperacusis or is longer-term exposure to								x
	Does short-term (eg.4-hours per week in a nightclub) exposure to loud noise cause hyperacusis or is longer-term exposure to background noise (ee road or train noise)?			1	1			x	1
	Does not be term leg 4 hours per west in a sightfold groupous to be desired course lymprocasis or is larger form appoure to bedermon a result and or to test model; the course were the result of the course of the		x		1				
	What do we need to do to determine (as a society, making policy) whether sound precautions on jobs or public places should extend beyond those typically mandated for preventing hearing loss? In other words, is the public at additional risk for	×	1	1			1		
	acquiring hyperacusis due to sounds (such as airport announcements, leaf blowers, high-speed hand dryers) beyond that	*	1	1	1 *		1		
	Why do I find some sounds, such as clanging, way more initiating and painful than other sounds?		x						
	Can hyperacusis be triggered by loud sounds?		×	+	+			+	
	Could more places make use of decibel indicators, as they use them in necreatal medicine to encourage staff and parents to keep the noise down? The confider where lever's at the GMC is to loud when individuals should to each other (no volume control) and offern here to work with my does that ower work body! I work or an open door policy.	×	×	1	1		l		
	control) and I often have to work with my door shut even though I work to an open door policy			1	1		1		
	Is it executes to comfo load sounds that mainfo cause it? For example the Center full that coince executing healphones may increase sensitivity. Should I be letting him listen to music too volume with his er ervenue abainst the sensitive.		x		1				
	For example the Centre telt that noise cancelling headphones may increase sensitivity. Should I be letting him listen to music too volume with his ear pressed against the speaker?		1	×	1		l		
	the sourcer warm new air means arams to source? Why do me was that how, after control moderately lood haccomed? If you've been a musician (specifically a brass playing your whole 16, and have been regularly exposed to loud sounds, can you continue to use oit in the field station both and seamed production of two ways. Why do my ears hurt hours after something moderately loud haccomed?		x		1				
	If you've been a musician (specifically a brass player) your whole life, and have been regularly exposed to loud sounds, can you continue to work in the field without further damage? Productively? How?		×						
	Why do my ears hurt hours after somethine moderately loud happened?								x
	What is the link between exposure to loud noise (pop music etc.) in early childhood to hyperacusis later on in life							x	
	Evidence of a link between noise exposure and hyperacusis?	×							
	Can hyperacusis be caused by noise exposure? Can unexpected exposure to an extremely loud sound trigger hyperacusis?	x x							
	exposure to loud noise How does loud sound cause hyperacusis?	х	×			_		-	
	Is it caused by acute noise exposure? And how?		x						
	I have ridden motorcycles for over 40 years. For half that time I had no hearing protection and the helmets were not designed								
	I have ridden motorcycles for over 40 years. For half that time I had no hearing protection and the helmets were not designed with notice in mind. I also used to go to a lot of live music which I had top give up. It is the reason I was inclose or could it be a hearing enough that I behind from my Mother who also had heyperuss and didn't fee motorbakes or go to music? ?		1 "	1	1		l		
	is invoeracusis caused by loud noties damage?		×						
	Is it caused by loud noises in the past. Does exposure to loud noise triazer hyperacusis, or is there a senetic predisposition?		x	1-	+	+	l	+	
	How can low frequency causes be measured/identified and tracked to source?		x						=
	expose for lacud noicels an causes? Is invocracusis caused by short-term exposure to loud noise?		x	\perp	\pm	_			
	Does sudden sounds cause it? TV. what about headsets, any difference between them?		x	+	+ =	_		$+ \neg$	
	Can exposure to loud noise in childhood lead to condition in adulthood? Can exposure to loud sounds worsen or cause hyperacusis?		x						
	Does your reaction to certain sounds cause Inorenzusis? Is Inorenzusis caused due to increased noise exposure?	×	×	+	+			+	
	Can listening to music at loud levels cause hyperacusis?	x							
	Does exposure to noise cause hyperacusis? Research exactly why (physiologically) setbacks occur from new loud noises?		×	+	+	+	 	x	
	Do loud concerts contribute to the condition?		x					\vdash	
	Does prolonged exposure to repetitive noises increase the likelihood of Hyperacusis Is someone generally predisposed to getting Hyperacusis from noise exposure?		x						
	Do electronic sounds cause hyperacusis and more importantly can they bring about vertigo experienced by Meniere's sufferers?		×					×	
	Does the daily use of headphones with normal volume level cause hyperacusis?		х						
	is it possible it was caused by a one time exposure to loud naise? Is it caused by recurrent loud noise?		x	+	+			$+$ \mp	
		_	×		1				
	Does incrugation exposure to soon rose make insperancials more issely. Does incruded exposure to soon rose make insperancial more issely. Does incruded exposure to incre make insperancial worse? Does exposure to unwanted noise pollution/frusalk in public places such as restaurants, bars, retail outlets cause any forms of homographics in althor staff of thisse places or commisses who mater thom?	*	×	t	1			1 -	
	hyperacusis in either staff of these places or consumers who enter them? Does extended use of headphones/exposure to noise from loud events cause Hyperacusis?		×	+	+	+	-	+	
	Does exposure to noise cause hyperacusis, such as playing a noisy instrument or listening to music at too loud a volume?		×	1					1
			×	1	+-	+		+	
	I soupui set to use the capital or executive from cetter entents, to that set on the setter eiguation, and twen propie and soupset for III. Notice is such a fly capital with derry notice exposure, it is important to dig disease. For example, many musicians have hyperaccials but deep rosine exemptions. These part to rest forward the might that stress causes hyperaccials. The guistions shall noted amountain ear about 1000 contact causes hyperaccials. While is the difference between long even exquest to food music (or notice) versus exposure to one loud traumatic incident like While is the difference between long even exquest to food music (or notice) versus exposure to one loud traumatic incident like		-	1	+	1		\vdash	
	hyperacusis but deny noise overexposure. Please put to rest forever the myth that stress causes hyperacusis. The questions		×	1	1		1		
	that need answerine are about HOW noise causes inseracusis. What is the difference between long-term exposure to loud music (or noise) versus exposure to one loud traumatic incident like		×	+	+	+	l	+	-
	a tirecracker going off most to your ear?			+	+	-		\vdash	
	Why do some people get hyperacusis while other people just become hard of hearing from exposure to loud music?		x	1	1	1			
	Does exposure to normal sounds make hyperacusis worse? Does exposure to loud or moderate sound during the recovery period of a brain injury cause hyperacusis?		x	+	+	_		+	
	is it caused, or exacerbated, by exposure to loud and/or unpleasant noises? I am thinking not only of loud music and		×						
	mechanical noise, but also the constant beeping of machines used to monitor infants in neonatal units.			1					
	In my response I am referring to what is corrections known as "pain hyperaculas"—where sound can cause pain. I are cretals that commandering-dead very high-infect abouted can could happenciase. This hyperaculas "this hyperaculas" is his hyperaculas "this hyperaculas" is not a second or mission places, other surrecognised: Loud sarrail determents, operating constantly or as buston follows: I envisional environments. In an office, from public closed systems which even entit bust loss as 2014 to which we environing the lives to the positives. See Some		1	1		1		1 T	1
	unrecognised: Loud animal deterrents cound can cause hyperacusis – this happened to me. This exists in various places, often unrecognised: Loud animal deterrents coperating constantly or as bursts of sound, in residential environments. In an office,		×	1	1		1		
	from public address systems which often emit loud tones at 20 kHz which are monitoring the lines to the speakers. See: Some electrical chargers, some lighting, some projector fam, some door greeners at: Of also like it more window perspected than		1	1	1		1		
	from public address systems which often erret tous tones at 20 kHz which are monitoring the lines to the speakers. See Some electrical chargers, some legith; come projector fans, some door openers stc. "I'd also like it more widely recognised that load impulse noise can cause hyperacusis, and not just timitus or hearing loss.								
			×	1		1		1 T	1
	I used to shoot in the army. My ears would "ring" for three days afterwards. I suspect this triggered (sorry) my problems, do you think that is possible?	1							
re the risk factors for developing hyperacusis or making it worked	I used to shoot in the army. My ears would "ring" for three days afterwards. I suspect this triggered (corry) my problems, do you think that is possible?	25 5		2	1			1	1 N
that are the risk factors for developing hyperacusis or making it worse?	I used to shoot in the army. My ears would "ring" for three days afterwards. I suspect this triggered (corry) my problems, do you think that is possible?		15	2		0	۰	1	1 N
Affact are the risk factors for developing hyperacus's or making it worse?	I used to shoot in the army. My ears would "ring" for three days afterwards. I suspect this triggered (corry) my problems, do you think that is possible?	25 5 X		2	1 X	0	0	1	1 N
What are the risk factors for developing hyperacusis or making it worse?	I used to shoot in the army. My arm would "rigg" for three days afterwards. I support this triggered (pony) my problems, do you think that is possible." 1. What risk factors make it likelier that a person exposed to an appearer cause (e.g. drugs, toxins, sound) will get hyperaccasi? In other words, what's associated with the variation in acquiring hyperaccisis given a similar procupation.	×	15	2		0	0	1	1 N
What are the risk factors for developing hyperacusis or making it worse?	I used to abote in the army, by ears would "ring" for three days alternantic. I superct this higgered (surry) my problems, do you took that is passible. 1. What not be better made it likeling that a parane exposed to an appeared case is g, drags, beains, sound) will get hyperscussion by the service which associated with the variation in supprint hyperscussion given is unified prosecution. Why are some people affected and not others—my better better problems with it from a young edge, and refused up to the coverance out of the made after a debt to do it you to purple the coverance out one problems with the coverance out of the made after a debt to do it you to purple the coverance out of the made after a debt to do it you to purple the coverance out of the made after a debt to do it you to purple the rich of paraner got the and give plant regions and purple some great way distinguished.			2		0	0	1	1 N
What are the risk factors for directinging hyperaccious or making it worse?	Load to shoot in the army. My earn would "ring" for three days alternantic Loapest this Stiggered (sorry) my problems, do you think that you problems. The stiggered country of the stiggered countr	×	15	2		0	0	1	1 N
What are the risk faction for developing hyperacuses or making it worse?	Load to shoot in the army. My earn would "ring" for three days alternantic Loapest this Stiggered (sorry) my problems, do you think that you problems. The stiggered country of the stiggered countr	×	15 X	2 X	x	•	0	1	
What are the shik flattors for developing hyperatosis or making it worse?	Load to shoot in the army. My earn would "ring" for three days alternantic Loapest this Stiggered (sorry) my problems, do you think that you problems. The stiggered country of the stiggered countr	×	15 X		x	0	0	1	1 N
What are the risk flatters for developing hyperacions or making it werea?	I could to shoot in the army. My earn would "ring" for three days alternants. Loopert this higgered (sorty) my problems, do you not have by expended to the stage problems of the problems. The problems of the stage	×	x x x x x		x	0	0	1	
What are the shik flations for developing hyperatoisis or making it worse?	I could to shoot in the army. My earn would "ring" for three days alternants. Loopert this higgered (sorty) my problems, do you not have by expended to the stage problems of the problems. The problems of the stage	×	15 X		x	0	0	1	
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. (why do children with autism get hyperacusis? Links to autism	×	×					l .
1	usly do children with action pit hypercosis? Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish to scales. Lish the scale scales. Lish there is direct lish action seems to selfer from it. Is there a direct lish? Lish careful held be scales. Lish describ held be scales. Lish describ held be scales. Lish there is direct lish action.		X X					İ
	Lots of coll with autism acceler to suffer from it. is there a direct link?		* *			x		I.
	is it directly linked to autism??	x x		+	+			
What is the association between hyperacusis and dementia?			1 0	0 0	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		
1	is reduced tolerance to noise in dementia related to hyperacusis ? Are those with dementia more likely to experience Hyperacusis than those without?	x x	 	+ + + -	 	 		I.
1	Association with dementia or not ts hyperacusis or a type a hyperacusis a common experience in dementias?	×	×					I.
	Is hyperacusis or a type a hyperacusis a common experience in dementias? What is hyperacusis for people living with dementia?	×						l .
Which management approach (e.g. assessment and treatment) is most effective for people with hyperacusis and dementia?		8 7	1 0	0 0	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	How do you assess people with dementia for hyperacusis?	x x						
	now do you assess people were demental nor reperacular. How can we help on patients with demential who have hyperacular as this can be particularly challenging? How do clinicians check for hyperacular in people with dementia? Now do clinicians check for hyperacular in people with dementia? Now do clinicians check for hyperacular in demential his assessment?		×					ĺ
1	How can the hyperacusis experienced in dementia be assessed?	x	_ ^					ĺ
	How can the extreme sensitivity in noise experienced by those living with dementia be managed and made more bearable?	×						Ĺ
1	For those with early stages of dementia, can hyperacusis be managed with education and awareness such that it does not	×						ĺ
1	become an issue later? How can dementia friendly environments also be designed to better reduce impact of hyperacusis?	·						ĺ
	How can audiology services better recognise hyperacusis in those with co-morbidities such as dementia?	×						L
Is hyperacusis associated with middle ear pathology?		7 2	5 0	0 0	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		ĺ
	Is tonic tensor tympani syndrom a major cause of hyperacusis?		x x					
1	What is the middle ear's role in hyperacusis (the tensor tympani etc) why isn't the middle ear explored more when some people report that their hyperacusis was entirely caused by the middle ear		x					ĺ
			×					ĺ
	What is the connection between hyperaculai and tonic tensor tymbani syndrome? Is there a relationship between a history of middle ear disease and hyperaculai? Is it linked to see histochasefulful are feeling?	x						ĺ
	ts it linked to ear blockare/full ear feeline?	×	x					ĺ
is there a link between hyperacusis and non-ear-related conditions for a Fibrographia	The state of the s							ĺ
Is there a link between hyperacusis and non-ear-related conditions (e.g. Fibrornyalgia, multiple sclerosis, diabetes, chronic fatigue, pemicious anaemia)?		14 2	10 2		0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	Tive been told that my hyperacusis is caused by fibromyaleia . Does multiple sclerosis cause hyperacusis?		x					
1	Does multiple sclerosis cause hyperacusis?		x	1 1	1 1			I.
1	Mostly I'd like to know what can help people with hyperacusis to sleep with normal environmental noise (especially when timitus means wearing ear plugs is distressing) or looking at insormia caused by hyperacusis		×	1 1		1		I
1	are connective tissue disorders involved? He goes through periods of extreme insomnia every few months and defends badly during these times. I'd love to know		×					I
1	He goes through periods of extreme insomnia every few months and defends badly during these times. I'd love to know whether this loss of sleep is related to his hyperacusis.		×					I.
1	We've got lots of allergies in our family - could any of those cause hyperacusis?	x	x					I.
1	Does sleep troubles (difficulties to get asleep,etc) can be a factor for hyperacusis?		x	1				I
1	connection to hyperbilinubin	×		1 - 1 -	+	-		I.
1	is involved common with decide diamosed with Fibromystia? Is there a correlation between hyperacusis and cranial nerve tension, eye strain, and vertico?		x x	1				I.
1	If there are links between hyperacusis and chronic fatigue syndrome. Online CFS group has recently lots of them mentioned		x			1		I.
1	whether this tool of legis in defect to the hymericus. We get that of steps in one thin, could any of feet cause hypericuss? Does defect in case hypericuss? Does defect in case hypericuss? Does defect in case hypericuss? Does defect in the self-defect of		x					I
1	According to the Pernicious Anaemia website, people with pernicious anaemia have a tendency to suffer from hyperacusis. PA is hereditary. I have it as did my mother, patemal aunt and patemal grandmother. All also had hyperacusis so is there a link?		×	1 T		1		I
What is the relationship between mental health and hyperacusis?		21 12	8 0		0 1	No relevant systematic reviews, scoping reviews or guidelines identified.		
	Do anxiety cause hyperacusis?	x x						
·	Does anxiety cause Invoeracusis? Doe anxiety contribute to it.		x					ĺ
·	is there a link to mental health issues	x x						ĺ
'	Aroiety problems and mental health issues Does aroiety cause hyperacusis?		x					ĺ
'	Link between mental health e.e. decreasion/sminty How does meditation and arreiety impact hyperacusis and to what extent?				×			I.
'	THEW DORN INSERTATION AND ATTEMPT INTO A THE ACT OF THE		x x					I.
	Do mental health disorders cause hyperacusis? is there a direct link with hyperacusis and .anxiety/depression/mental health issues.	x x						Ĺ
	Is hoperacusis linked to any of the following: 1. Decression Is hyperacusis linked to any of the following: 2. Ansiety		x x					Ĺ
	Is hyperacusis linked to any of the following: 2. Anosety How much of the symptom is associated to stress/ansiety	×	×					I.
	Does mental health or other issues affect hyperacusis? What is the link between arosety and hyperacusis?	X X						Ĺ
	Do children who present with hyperacusis go on to present with anxiety related problems later in life	×						Ĺ
	How much can anxiety contribute to hyperacusis Are certain mental health conditions linked to hyperacusis?	X X						Ĺ
								i e
1	Does it cause depression and/or arrotety?		x					Į.
Is humanizated inhead to other constitution/conditions?	Does it cause depression and/or anxiety? What role does depression and anxiety, and other mental health issues, play in how it affects people?	2 4	x x		0 0	No relevant orstematic reviews conning reviews or quiphlines identified.		
	Does it Cases depression and/or armisty? What rake does depression and armisty and other mental health issues, play in how it affects people? What rake does depression and armistic yeard other mental health issues, play in how it affects people?	9 4 x	X X 4 1	0 0	0 0	No relevant systematic reviews, scoping reviews or guidelines identified.		
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	Dent to case depression selfor mental? What is also depressed analysis, and other mental health loans, gifts in how it diskint paraginal? what or concludings are their paraginal analysis and presenting hyperieuses. In these a loan between the present of the presenting hyperieuses. In these a loan between hyperieus and enjoymethical? What are the associated an underlikes? John the season between hyperieus and enjoymethical? What are the associated an underlikes? John these is the between hyperieus and enjoymethical? What are the associated and endoughters? John these is the between hyperieus and enjoymethical? What are the associated and the endoughters are present and the control of the endoughters are present and the control of the endoughters and the endoughters are presented by the endoughters are presented by the endoughters and the endoughters are presented by the endoughters are associated by the endoughters and a related to historic relation presents to be and entire the third control of the endoughters are associated by the endoughters and a related to historic relation properties be the endoughters are the en	X X X	x x x x x x x x x x x x x x x x x x x	0 0	0 0	to release systematic raters, scoping reviews or guidalism identified.		
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		connection to head injury Does trauma cause hyperacusis?		×	x		1						
		Does trauma cause hyperacusis? Can trauma be a cause of hyperacusis? My questions are about the science behind invoeracusis: What is noise doine to the ear and brain?			x								
		An usering or a User in represent in preceding in My casestions are about the science behind hoseracosis: What is noise doine to the ear and brain? I was in a certail accordent and due to whipsian developed invanidous with hyperacosis and timelous which I did not have before the accordent. What six he reason for developing or cause during the accident that left on this disabling only my			×		1		_				
		ears/brain aftected. ? Could it be caused by childhood trauma to the head?			x		_						
		Does physical triauma cause hyperacusis? Is hyperacusis caused by a physical triauma?			x		$\pm -$		=				
		Links to starvation of oxygen at birth				×							
		Relationship if any to either traumatic brain injury, or to hydrocephalus () am a director of a national charity that deals with hydrocephalus and we see hyperacusis in some people with the condition. Is it related to the hydrocephalus, or would it appear independenti?)						×					
		Independently?) Would any accident to the head have an effect?			х								
1062	Does stress cause or make hyperacusis worse?		17	5	10	0 0	1	1 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		Do stress cause hyperacusis? 3) Does stress cause hyperacusis		x x			_				·		
		Does stress cause hyperacusis? Does stress cause hyperacusis?	·	x	×								
		Does stries contribute to it. Can extreme emotional upsets cause huperacusis?			x								
		Does stress cause hyperacusis? Does stress cause hyperacusis?			x								
		Con a stress cause interesticate. Can a stressful life event or an increase in stress levels cause onset of hyperacusis? Does stress cause hyperacusis?		×									
		Does stress cause hyperacusis? Can stress cause or worsen hyperacusis?			×		_ ^						
		Is invoeracusis caused by stress and/or a pure osychological reaction. Does stress cause invoeracusis?			x								
		Loss tress Case or vorum hospitalism? In homesticus caned but dress and/or a sour accordinated maction. Does others Case or homesticus? Jose stress Case or homesticus? Jose stress Case or homesticus? Jose stress Case or homesticus? Jose of the Case of the Street of the Street or homesticus? Jose of the Case of the Street or homesticus?		×	x								
1063	Why does hyperacusis fluctuate?	Can hyperacusis be caused or exacerbated by stress?	4		X 4			×					
1063	Why does hyperacusis fluctuate?		4	۰	4	0 0	۰	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		Why can hyperacusis fand tinnitus fluctuate from day to day or even hour to hour? Why does hyperacusis fluctuate?			x								
		Why does hyperacusis come and go again - it can vary according to the time of day, and it can disappear for weeks?			×								
11164	What is the role of fear in hyperacusis?	How is the mental pain formed that I experience with loud noise, and that varies in intensity?	3	1	2 2	0 0	0	0 0		No relevant systematic reviews, scoping reviews or guidelines identified.			
1004	And the second state of the second se	is there a link to fright rather than an audiological discomfort	,	×		L ·				Assertative remains, washing reviews or gardenines identified.			
		Does the fear or anticipation of an uncomfortable sound, such as when a sinen is approaching, heighten the condition?			х								
		Is hoperacusis related to fear/phobia reactions?			x								
1065	Which drugs cause hyperacusis?		19	6	13	0 0	۰	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		Do certain drugs cause hyperacusis? what can influence the onset of hyperacusis? Drues		×	1								
		Are there particular medications which could cause hyperacusis? 1) what medications cause hyperacusis		x x	1								
		Do ototoxic druss cause hyperacusis? Can this be caused by taking too many antibiotics?			x		$\pm -$		=				
					x								
		Can insections is selected in account of " What medicines is should be accided ?" Can have be caused to \$500. the Can before be caused to \$500. the Can certain medicine caused herefore What met could \$500. tale?" What met could \$500. tale?" Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine cause herefore Can medicine Can complete Can medicine Can complete Can medicine Can complete Can medicine Can complete Can medicine Can complete Can medicine Can complete Can medicine Can complete Ca			x								
		What role could \$58s play?		×	x		-						
		Can medications cause herearcoin? relation to entit decrement deux such as châloneum. Can down hore an effect either in canoine et coninc herearcoin? Extra down hore an effect either in canoine et coninc herearcoin? Extra down medication and anoise; mensat herearcoine and to exhet enter?			x								
		Can druss have an effect either in causine or curine hyperacusis? How does meditation and armiety impact hyperacusis and to what extent?			x								
		Should specific medications be flagged by the FDA as cause for hyperacusis or flagged as a trigger for flare ups in the condition like for allergic actions so that pharmacies know "this is a prescription a hyperacusis patient should not be on".			×				_				
		Does specific medication cause hyperacusis?		×	1		-		-				
		does interaction with medicines (in.nsaid's) have a bearing on the cause of hyperacusis my question here is written in the first box - ie are there medicines that should be avoided			x								
IU66	Is there a genetic element to hyperacusis?		29	,	10	7 0	۰	2 1	0	No relevant systematic reviews, scoping reviews or guidelines identified.			
		is it genetic? are three any predisposing factors for hyperacusis Do you inherit hyperacusis?		x x									
		Do you inherit hyperacusis?		Ÿ		x	-						
		Do you inherit hyperacuiss? Is there an invendury link Is there genetic cause		×									
		to time: gettine: citatie to their yellence of genetic predisposition to hyperacosis? What is role of hereotic? What is role of development/environment? What is role of development/environment?		X X				x x					
				×	x		_	×					
	I .	I wonder why does a a diamosis of SLD and ASD predispose him to hyperacusis			+ =	x	+	1 - 1 -				i l	
	I .	family history		×									
		Can hyperacusis be hereditary?		×	x x								
		Can hyperacosis be hereditary? Are some excels predictory? Are some excels predictored to the condition?		×	X X X								
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1667	What I he had each (Zooly) health are environment to support proprie with holders are not	Can be served and serv	n	4 x x x	X	X X X X X X X X X X X X X X X X X X X		1 0		to infenser systematic reviews, using a reviews or guidelines identified.			
	house and	Can be served and serv	22	x x x x x x x x x x x x x x x x x x x	X	X X X X X X X X X X X X X X X X X X X		1 0	x				
	What is the base work (inclu), freelits we environment to support people with bosons and is? What we have work (inclu), freelits we environment to support people with bosons and is? What we the work worming sape of hypersocous?	Can be served and the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second served of the second second served of the second s		x x x x x x x x x x x x x x x x x x x	X	X X X X X X X X X X X X X X X X X X X		1 0	x	his inference application reviews, unique previews for guidelines shoutfland.			

$\overline{}$					_						
1069	Is hyperacusis related to physical changes in the ear or brain?		74	17 46	5	1	1	2 1	1	No relevant systematic reviews, scoping reviews or guidelines identified.	
		is hyperacusis primarily a psychological issue? How do chanses in peripheral and central auditory system relate to problems of patients in clinical settines?		x							
		were and how did it start What fMRI development inform thinkine in this areas? Do physiological Angains within the brain cause hyperacusis or is it, a psychological response based on an individual's		x				×		-	
		Do physiological changes within the brain cause hyperacusis or is it a pyschological response based on an individual's		×							
		perception? What percentage of hyperacusis has a predominantly psychological or behavioural basis		×	_	+	1		-		
		is it in the ears or the brain?		x x		х				-	
		What's the mechanism(s) of sound-induced ear pain at onset of hyperacusis? What are the mechanisms underpinning the possible causes of hyperacusis (e.g. those listed by Baguley, 2003)?			×	T ^				1	
		What role does the acoustic stapedial reflex play?			ж х						
		What role does the accustic statedial reflex play? What are the causes of variation in the accustic stapedial reflex? (Goulis et al 1998 identify clinical & sub-clinical leads to the control of the co			×				_		
		In the condition related to neurological problems?		x							
		Is it linked to mathunctioning stapedial reflex in some cases? functional MRI studies in children with hyperacusis to locate which area of brain is involved and what is the possible	-	x	-	1	1 -		х		
		What are the cause of variation in the account dispellat refers? (So plant et al. 1998 identify diseast it sub-clinical internationalisms.) 1.8 linked in a medium charge dispellat after the same cases? 1.8 linked in a medium charge (supplied after the same cases? 1.8 linked in a medium charge (supplied after the same cases? 1.8 linked in a medium charge (supplied after the same cases? 1.8 linked in a medium charge (supplied after the same cases?) 1.8 linked in a medium charge (supplied after the same same cases?) 1.8 linked in a medium charge (supplied after the same same cases) 1.8 linked in a medium charge (supplied after the same same cases) 1.8 linked in a medium charge (supplied after the same same cases) 1.8 linked in a the medium charge (supplied after the same same cases)			_	1	-		-	-	
		what row, if any, coins the cocreae necessar mechanism nave in injuriacius? What is the mechanism that causes hyperacusis? How can we uncover the underlying what physically happens in the ear and/or brain that causes hyperacusis in order to		x x							
		How can we uncover the underlying what physically happens in the ear and/or brain that causes hyperacusis in order to develop a cure?		×							
		Is hyperacusis physical, emotional (limbic system), or both?		×							
		Are there physical factors? Are there psychological factors? Are there enricemental factors?		x x							
		Are there environmental factors?		x						-	
		is there a gut-brain axis link? In other words, can the state of your gut and gut micro biome affect the state of your hearing - aculty, loss or quality? Since both what we ingest (food or drugs) as well as stress can affect the composition of the micro		×							
		acuty, loss or quality? Since both what we ingest [food or drugs] as well as stress can affect the composition of the micro biome - I would be interested in knowing if there is a link to hearing and if so, can the first be modified to impact the second?				1					
		is, it caused by a otherical reason rather than psychological? what met-herions are affected? what there herions are affected? What becomes to the brain when some pocole with dementia develo hyperacusis and some don't		x x		<u> </u>					
		What histories to the brain when some people with dementia develo hyperacusis and some don't		x						-	
		Qu: Is hyperacusis a problem centralised or peripheral auditory phenomenon?		x							
		is it associated with previous auditory exposure or symptomatic of a CNS issue? If we are looking for a cure, should we be looking to intervene in patients' ear, or brain, or both?		x x		+	1				
		How can it be established whether or not it is an ear problem or a hearing problem or a psychological problem?		x							
		IS there a physical basis for hyperacusis		x							
		is it a psychological problem rather than that affected by hearing?		×		+	1				
		Assess CAEs and ABR results in hyperacusis patients. Are there differences compared with normal population.		x		1	1			-	
		Is byperacusis more psychological than physical? Is it a physical condition or a mental condition? Is all in the misd?		x							
		is it all in the mind?	-	x x	-	1	1 -				
		is there a link with brain damage? In. Misophonia has been linked with a brain disorder by research in Newcastle. What is the physical mechanism?		×	_	1	-	x	-	-	
		Please tell us. what is the underlvine mechanism!!?		x x							
		Please, what are the mechanisms of Hyperacusis? What part of the condition is in the limbic system (influenced by stress and emotions), and what is purely physical symptoms?		x		1	1				
				, x	_	1	-		-	-	
		How do they relate to each other flimbic system and ohysicall - and how should they be treated? what biological factors cause.		x							
		is it a otheriological or governological? Does hyperacusis hiere a physiology or governological origin or both?		x		_		×		∄	
		1) how common is dysfunction of the stapedius musle in children presenting with increased sensitivity to sounds		x							
		to what extent is it unavoidable/in your series and to what extent is it caused by environmental factors?		x	x						
		to what extent is it unisocidabler'an oose pereis and to what notices in it caused by enviscommental factors? What extents the sentitative is it mentional or chivisolatical Can noise propose, transam, infections or neurons after the way the auditory pathways process incoming signals and therefore process it is painful/discomfort?		x							
		therefore process it is painful/discomfort?								-	
		When the underlying mechanism of the condition is not understood, shouldn't the first source of data be the patient?		x							
		Does sensitivity vary with mood as it seems to with Tinnitus? How is Hyperacusis perceived (either brain or ear levell)?		x							
		now is reperactions perceived (extraer orann or ear reverse). It is classical by saything physical -ag anatomical features (born with or developed) or any kind of trauma? Does hyperactiss have a physiological cause or is it primarily psychological? Hyperactiss is often seen in people with normal		х х							
		hearing but who have experienced an acoustic trauma.		x							
		What actually is happening in the ear/brain that causes hyperacusis ? Is hyperacusis all in the mind?		×		+	1				
		is there something wrong with the ear or the hearing part of the brain in hyperacusis sufferers? What are the mechanisms? Middle ear, inner ear, brain?		X X							
		What is the mechanism of sound induced ear pain at onset?		x							
		Does damage to the inner ear cause hypercusis? What is the provisional and emphasical impacts of cofficien from this condition? The formal instation, Mot being this to		×		+	1				
		participate in social eatherines. Is there a reproheheated commonant to dealine with hyperarcusic?				1	-		-	-	
		when it we instrinting that an amount and a mount of a		x x							
		Does damage or changes in blood now cause it? Or is it more damage from load sounds?		x x		<u> </u>					
		Where is the damaze? Is hyperacusis biological or psychological? (I have been told its both, (superior semi circular canal dehiscence and also associations that I have made over time with certain sounds)		×							
		What are the physiological triggers that cause hyperacusis		×						-	
		Why it is a hase problem amonest people livins with dementia and is caused by brain diseases. What are the possible neurological mechanisms.		×	×						
		Is there a chrisical cause of hyper acusis? Is homeograpic related to price promise Off to childhood par disease.		x	_	+	×				
1070	Does nerve damage cause the pain associated with hyperacusis?	A CONTRACT OF THE PROPERTY OF	5	2 3	0			0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.	
		Does synaptopathy lead to hyperacusis?		x x							
		Does synapticathy lead to hyperacusis? Could it therefore be reliated to synapticathy resulting in reduced inhibition? What of noneing eventions and 2		x v		+				-	
		Why do people experience pain ? Is other anatomy involved, such as facial nerves?		x						7	
		I want to know the mechanism behind hyperacusis with delayed and lasting pain. Do nerve damage cause this?		x							
1071	What area(s) of the brain and patterns of activity is/are associated with hyperacusis?		29	9 16	1	1	0	1 1	0	No relevant systematic reviews, scoping reviews or guidelines identified.	
	-	I am verv interested in the role of the PAG area of the brain and PTSO like behaviour is there a model that can explain it?		x						-	
		Is there a model that can exclain it? What are the Central Processine causes in Paediatric occulation What serts of the brain seedifically contribute to the response.		x							
		What parts of the brain specifically contribute to the response. Is there an underlying brain disturbance causing hyperacusis?		x		<u>L</u>	┷╛	x	<u> </u>		
		vents aren't un time drawn southern't commonant commonant un ten reasonale. Il there an unserferind beland influentarious cassimit horizontain? What do so this mean exembolisable, and hore useful is in characterisine horizontain for treatment studies? What is hopening medient the brain to case the horizontain. Yes—we need to know what within the brain haspeens when horizontains each trinsered.		x		х		x		-	
		Yes-we need to know what within the brain happens when hyperacuals nets trippened.		x x				1 1			
		Could there be an inflamatory process in the auditory center of the brain triggered by very loud noise that causes it?		×		1					
		Can an MRI or Cat Scan show brain abnormalities that are linked to hyperacusis		x							
		Can an MRI or Cat Scan show brain abnormalities that are linked to hyperacusis. What causes if Presumably? Pit Sub ato neurotransmitters gone wrong, if this pathway could be discovered more then I hope access could be discovered. It is complete linked to the neurotransmitters for abathesis, and severe stimulus overteed and pain and the vegas nerve, as my statement that the contraction of the severe stimulus overteed and pain and the vegas nerve, as my statement that the contraction of the severe stimulus overteed and pain and the vegas nerve, as my statement that the contraction of the severe stimulus overteed and pain and the vegas nerve, as my statement that the contraction of the severe stimulus overteed and pain and the vegas nerve.		×	_	1					
				x		L			L		
		Can brain imaging be used to diagnose? functional MRI studies in children with hyperacusis to locate which area of brain is involved and what is the possible		x		1				-	
		mechanism?		x		1	1				
		Should a brain scan be required for correct diagnosis, in addition to physical examination and audiology screening?		×							
		Can we play a very faint sound and look at the ABR, EEG or MEG scans and tell who has hyperacusis and who does not?		x							
		witch part of the brain (or hearing system) is damage?		x x							
		What neurotransmitters cause hyperacusis? What are the anatomical causes?		x		L	L		<u> </u>		
		Role of brain Does something happen inside the ears or to the brain during a hyperacusis spike?		x						7	
		Find a way of specifically tarretine the pain cathways in the auditory system, to reduce pain.		x x							
		Find a vev of seedifically transitise the calls nothways in the auditors waters, to reduce cain. 6. Can PET scans be used to localize pain sources? PET scans are much quiete than MRs and different tracers can detect traditional inflammation, neuro-inflammation, and growth in substance? Pecaptors. MRS scans are also quiet and are already		x							
		used for timitus. Which part if the brain, auditory complex is malfunctioning?		×	-	+	1				
		Autism and misfunction of brain			×					7	
	Can otitis media with effusion cause hyperacusis?	Does the lack of correct signals in the brain cause hyperacusis?	6	4 1	0		0	0 0	1	No relevant systematic reviews, scoping reviews or guidelines identified.	
IU72		Can any of the following result in hyperacusis: recurrent childhood otitis media with effusion?		x		<u> </u>					
1072				x	1		1				
IU72		Can any of the followine result in hyperacusis: ear infections as adults? Is it often seen in children with alue ear.		^					×		
1072		Can are: of the followine resist in hoseracusis: sei infections as adults? Is it often seen in children with jiba war Can sinus/war infection cause hyperacusis?		×					×		
IU72		Case area of the followine result is honoracusine, rescuesed childhood otitis media with effection? Case area of the followine result is honoracusine, as effections as adults? Case area of the followine results in common the followine as adults? Case area of the followine results of the follo		x x					x		

IU73											
	Can infections (e.g. measles, yeast, viral) cause hyperacusis?	10		7 1	۰	0	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
		what can influence the criset of hyperacusis? Virus Is one of the possible underlying causes a viral infection?	x x								
		Can this be caused by a verus? What reliation to Hyperacusis does Tinea Versicolor have?		x							1
		What relation to Hyperacusis does Candida ownerowth have?		x							
		Can childhood diseases cause hyperacusis? Can havine measles as a child cause hyperacusis?		X Y							
		Can viruses cause hyperacusis?		x							
		Do sinus infections increase the effects of hypercusis? Can infection contracted during birth or shortly after birth cause hyperacusis?		х х						 	<u> </u>
IU74	Can ear care (suctioning, syringing, swabbing) cause hyperacusis?	S S	5 0	4 1	0	0	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
		Does the insertion of cotton swabs deep inside the ear canal cause hyperacusis?		x							
		Are people who have lots of ear wax more susceptible to hyperacusis when wax is removed?		x							
		Does resular ear cleanins help or worsen the condition? Does ear sympling cause hyperacusis?		x							
		Does ear syriniting cause invogracusis? My daughter complained of severe pain from her left ear after having her ear suctioned. This did not go away so my question is:		×							
U75	is hyperacusis due to physical or psychological issues or is it a combination of both?	Does for successive in an noncost setting cause reconstructs in conserve or adopts?	12 6	22 3				٠.	No relevant systematic reviews, scoping reviews or guidelines identified.		
073	is represents one to previous or psychological issues or is it a comprision or both?	Does anvone really know what the cause is?		x ,				•	no neevant systematic reviews, scoping reviews or guidelines identified.		
		Causes of hyperacusis	x								
		what causes hyperacusis in children. What are the five most common causes of hyperacusis and	X X				_				
		What causes it?		x							
		Are there different underlying conditions that cause hyperacusis? Why do I have hyperacusis if I have always avoided loud noises?		x							
		What does cause hyperacusis? I realise I have it though it hasn't been officially diagnosed.		x x							
		Can it occur with no obvious causer Is invoeracusis caused by other disorders such as autistic spectrum disorder.									
		What the typical cause and how can it be avoided		x x							
		I would like to know what really causes hyperacusis	x								
		Was it caused by high amount of stress or a severe cold I had at the same time?		x			_				
		What are the five more common quaries forecessive and that cases (2) What is been (2) What is been (2) What is been (2) White (2) when the three contribution of the cases contributed on the contribution of the contribution						×			1
		what cause the hyperscoris What causes thereous steme than timuloupheaving biss I seed to lone all there is to know, why does this happen, will it always be there, how can I help myself because asking moreous elect table for to much time.		x	\vdash	+	-+	\vdash			1
		I want to know all there is to know, why does this happen, will it always be there, how can I help myself because asking		x							1
				x							1
		Is it instruological At present we are not sure how hyperacusis starts. The causes need to be identified before we can understand how to prevent is	×								1
		it What causes it?		×							
		What are the different types of cause - medical, psychological etc.	×	×	$\vdash \neg$	-		$\vdash \exists$			1
		I know it comes on predically, but what actually caused it? Is it briggered by worry about hearing a loud noise or can a loud noise in itself brigger the condition? What causes howercosis to star? The mr case titler it was a wriss I was accoud to in mr early forties.)		X X							1
		What causes hyperacusis to start? (In my case I think it was a virus I was exposed to in my early forties.)		x	+	\vdash		$\vdash \exists$			1
		What, other than a sound traumatism, can cause hyperacusis? (I think that I experienced a sound traumatism in my case).									
		What is specific that causes hyperacous to be present. What is the cause of hyperacous?		x x x	1	 		\vdash			
		Are there any specific trissers?		x							
		Researchers should compare the different causes e.g. noise, or physical injury and show if they create different symptoms.		x							1
		Can we discover what causes the vast chanses in the sounds? What are the procible causes and parenteeing manhanisms		x x	+ =	-		$\vdash \exists$			1
IU76	Do dental problems cause hyperacusis?	3	3 0	3 0	0			0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	CO VENTAL PROCEETIS CASSE HYPERACULAS				-	-		-	no rerease systematic reviews, acoping reviews or gardenines interpretar.		
		Can wisdom teeth cause hyperacusis? I've found three patients stories where hyperacusis went away after removing impacted wisdom teeth but also some accounts where wisdom tooth removal caused the hyperacusis. More crossover work between		x							
		audicions, dentistry and ENT is needed. Can teeth grinding cause condition?		x							
		Does a bad tooth occlusion can cause hyperacusis (tooth contacts only on the very latest tooth on each side of the mouth)?		x							
	Does learned behaviour from family members with hyperacusis increase the risk of	6	6 3	3 0				-	No relevant systematic reviews, scoping reviews or guidelines identified.		
1077	hyperacusis developina?	Will living with a family member who his hyperacusis cause hyperacusis? (i.e. learned behaviour)	. x	, ,				U	No relevant systematic reviews, scoping reviews or guidelines identified.		
		if parents are sensitive to certain sounds and display a negative behavioural response to sound - can this learnt behaviour be	x				_				
		transferred over to children acculting in periods and businesses in 2									
		Can be received in whether the received of the received by received the received their chief's reporting reaction to certain									
		transferred cose to children, resultine in amoise's and horeaccusis? Can hyperacusis in young children be further prevented by parents - simply by ignoring their child's negative reaction to certain scounds and providing children with positive feedback on these scounds? Eg: if parents are reliased in the presence of the sound	×								
		sounds and providing children with positive feedback on these sounds? Eg: if parents are relixed in the presence of the sound source will their children be relixed too/ Can hyperacusis be learned? (i.e. could we have been sensutised to it by our mother?)	×	x							
		sounds and providing children with positive feedback on these sounds? Eg: if parents are relaxed in the presence of the sound source will their children be relaxed too/	x	x x x							
1078	Can hyperacusis be caused or made worse (e.g. by hommonal changen) in presnance?	sounds and grounding children with positive feedback on these sounds? Eg if purents are related in the presence of the sound source will their children be related to the sound of the sound sounds of the sound sounds of the sound sounds of the sound sounds of the sounds the sounds of the sounds of the sounds of the sounds of the sounds of the sounds of the seast throught set in that connectours and refeating sounds in seast throught set in that connectours and refeating sounds in seast throught set in that connectours are derivating sounds in seast throught set in that connectours are derivating sounds in seast throught set in the sound season of the sound season of the season of the sounds of the sound season of the sound season of the season of the sound season of the sound season of the season of the sound season of the season of the season of the sound season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of the season of	x 2 0	x x x	0	0	0 0	0	No relevant systemátic rovines, scoping rovines or guidelines identified.		
U78	Cin hyperacoals he caused or made worse (e.g. by hormonid chenging) in pregnancy?	such and providing divition with positive feather on these sounds? (age of pure has or related in the presence of the sound statement street sound.) Interest with the related sound in the sounds of the pure mother?) with through (or to lot de concession and middle controlled in the pure mother?) with through (or to lot de concession and middle controlled in the pure mother?) The sound is a sound to the controlled controlled in the sound of the controlled in the controlled		X X X 1 1 1	0	0	0 0	0	to relevant systematic reviews, scoping reviews or guidelines identified.		
		seach and providing distinct with providing feetball on filter south price (per private or related in the presence of the sound for the price of the	2 0	x x							
	Gan hyperacsis is caused or made worse (p, 5 by homonal changes) in preparecy? On macrobio-letted problems cause hyperacsis?	seach and providing diffusion with position feathbol on these sounds by (or prevents are related in the presence of the sound before the prevent of the sound by the prevent in the install. It is called at the best extended to the sea resolute? Set the region for the best extensionary and restricting control? The set the region of the second control	2 0	X X 7 0		1			No relevant systematic reviews, scoping reviews or guidelines shertified. No relevant systematic reviews, scoping reviews or guidelines shertified.		
		seach and providing diffusion with position feathbol on these sounds by (or prevents are related in the presence of the sound before the prevent of the sound by the prevent in the install. It is called at the best extended to the sea resolute? Set the region for the best extensionary and restricting control? The set the region of the second control	2 0	X X 7 0 X							
		seach and opcoding distinct with position feather on these sounds (p. of pursues or related in the presence of the sound between the presence of the sound between the sounds of the pursues is beautiful to be the convenience; and interest in the presence of the sound of the sounds of the pursues in the sound of the sounds of the pursues of the sounds of the pursues of the sounds of the sounds of the sound of the sounds of the sound of the sounds of the sounds of the sounds of the sounds of the sound of the sound of the sounds of	2 0	x x 7 0 x x x		1					
		seach and providing diffier with positive feather on these sounds by Egy Egyments are related in the presence of the sound season are little related to the sound season and the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related to the sound season are related by homeout diagent in properties? Let a represent the sounded by homeout diagent in properties? As a surface that could be not seen properties with may shiply South Tell count be presented. The sound the sounded by the sound season are in an are in ord sets to be sound or the sound season are	2 0	x x x x x x x x x x x x x x x x x x x		1					
		seach and opcoding distinct with position feather on these sounds? (are of parents or related in the presence of the sound by the presence of the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound sounds? Seat hypercease his sound by homeout diagram in preparent? Cast hypercease his sound by homeout diagram in preparent? Seat his parents in the sound and by the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the parents	2 0	X X 7 0 X X X X X X X X		1					
		seach and operating dations with position feelblus on filter country (or granter) are related in the presence of the count for the position of the count for the position of the country (or the presence) is benefit to be the contention of the country (or the position of the country (or the position of the country (or the position of the country (or the position of	9 1	X X X X X X X X X X X X X X X X X X X		1					
		seach and operating dations with position feelblus on filter country (or granter) are related in the presence of the count for the position of the count for the position of the country (or the presence) is benefit to be the contention of the country (or the position of the country (or the position of the country (or the position of the country (or the position of	2 0	X X 7 0 X X X X X X X X		1					
פלטו	Ob muscufaisheted grablems cause hyperecusis?	seach and opcoding distinct with position feather on these sounds? (are of parents or related in the presence of the sound by the presence of the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound by the parents in the sound sounds? Seat hypercease his sound by homeout diagram in preparent? Cast hypercease his sound by homeout diagram in preparent? Seat his parents in the sound and by the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the sound of the parents in the parents	9 1	X X X X X X X X X X X X X X X X X X X		1					
פלטו	Ob muscufaisheted grablems cause hyperecusis?	seach and opcoding distinct with position feelbale on these sounds? (e.g. of puretus are wheal in the presence of the sound below the content of the sound below the puretus of the sound below the content of the sound below the sound of the sound below the content of the sound below the puretus of the sound below the sound sounds? See hyperes so the sound below the sound sounds? See hyperes so the content by horizontal chapter in preparency? All describes the content by horizontal chapter in preparency? All describes the content by horizontal chapter in preparency? See hyperes so the content by horizontal chapter in preparency? See the sound of the content of the sound of the soun	2 0 1 1 x	X X X X X X X X X X X X X X X X X X X	0	1 x	0 0	0	To relevant systematic reviews, sosping reviews or guidelines identified.		
1079		seach and oppositing distinct with position feelball on filter south of Fee Spanning or education the presence of the sound for the position of the presence of the sound for the position of the sound for the position of the sound for the position of the sound for the position of the sound for the position of the sound for the position of the position of the sound for the position of the position	9 1	X X X X X X X X X X X X X X X X X X X	1	1 x	0 0	0			
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1	1	How can clinicians test for hyperacusis in children or adults without causing a lot of pain during the following days or even			1		_			1	I .	1
		weeks?			×							
		I would like to see a questionnaire devised and validated to identify children with a significant degree of hyperacusis and one	1	×								
		which can rate its severity. Should audiology clinics ask specific questions related to sound sensitivity to identify children with hyperacusis. 7-many parents								†		
		don't know it is a condition and can be treated.	1	×								
		Difference of assessments within different environments like observations at school home and in a social environment as a	i			×				1		
		controlled environment would not effect children's to much it		×					-			
		What assessment tools and tests should be used for children? How are children assessed and how can I reassure my child before the assessment?				x	_			1		
		Are the tests ones which can only be administered by specialists or are they GP friendly?			x					i		
		What is best assessment method for hyperacusis in toddlers?		x			_					
		is there a cuestionnaire that is used or validated when askine parents about hyperacusis. What is true hyperacusis and just neduced level of tolerance?		×					_	+		
				×								
		How do you distinguish between the two (hyperacusis and reduce sound tolerance) as it is not exactly the same?		×								
		Is there a listening test where I can self report in what circumstances my hearing becomes hypersensitive?			x		_					
		how can you best assess hyperacusis in children? how do you measure severity of hyperacusis?		×						†		
		What categories are there for hyperacusis?		x						i		
		How do you access different degrees of hyperacusis			x							
		I would like to see a way to differentiate between the severity of hyperacusis from one person to the next. It is no a differentiate of disability?		×	x		-		1	-		
		is it on a sliding scale of disability? My experience with this is that Hyperacusis is not assessed in any way just decided by symptoms in the patient and past history		i - ^ -	t		1	t	1	i		
		in my daughters case. How do clinicians assess/diagnose in children?			1	×			1	1		
IU82	What are the 'red flags' for serious underlying conditions in hyperacusis?		4	2	1	0 1	0	0 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
	de la company de	Are there important red flags to cover in the assessment		×			+		+	, and the same of		
		Can you rule out a more serious disorder, like a brain tumor, or see a definite association with more serious disorders with	1		×					1		
		cumulative research and results with your research to date?			×					ļ		
		what observations/reports trigger an hypercausis assessment in contemporary UK practice?			_	×	_	1 1	_	1		
_		Are there any concerning causes of hyperacusis i.e. red flags for serious pathology underlying this		* *	_		+		_			
1U83	Do any drugs prevent hyperacusis?		9	4	4	0 0	۰	1 0	0	No relevant systematic reviews, scoping reviews or guidelines identified.		
		Avoidance of certain medication		x								
		Are there prescription meds to reduce or eliminate hyperacusis?		l	x x	 	+	 	1	1		
		Medication? Such as amitryptyline? Are there any drugs that can stop it getting worse?			X					†		
		Is there a pharmacological intervention for prevention of hyperacusis?						x				
		Does ototoxic medication avoidance prevent hyperacusis?		x]		
		Is there a vaccine that can prevent hyperacusis?		x x			_					
		Can hyperacusis be prevented by medications? Can antidepressants and other drugs prevent hyperacusis developing?			×					†		
11194	What management approach for hyperacusis is most effective for adults/children with		8	5		1 2		0 0		No relevant systematic reviews, scoping reviews or guidelines identified.		
1084	autism?			,			,			no resevant systematic reviews, scoping reviews or guidelines identified.		
		Does better awareness of hyperacusis help children with high functioning autism/Aspergers understand their condition and cope with it better?	1	l	1	×	1		1			
		management strategies children and the this differentiated for children with Autism or developmental delay.	1	×	1					1		
		2) How can children with ASD be helped with hyperacusis		x]		
		What management is best for Autistic children with hyperacusis?		×	1	×	-	l	-	-		
		does autism diagnosis preclude investigation of hyperacusis investigations in contemporary UK practice? I suspect that an autism diagnosis precludes hypercausis investigations, and that healthcare provision therefore isn't available		l	+		+	 	+	1		
		for autistic children who also suffer hyperacusis.				×						
		In complex children (severe autism, severe processing disorders, abnormal arxiety in children) having to deal with auditory	1									
		desensitisation is bottom of priority list OR arosety needs to be addressed first via psychology/CBT before the auditory aspect	1	×	1							
		can be addressed feels like all referrals come to audiology, where in fact it would be more appropriate to refer to other services first.	1	l	1	1 1	1		1			
		how do you help autistic children with hyperacusis?		х								
IU85	Which self-help interventions are effective for hyperacusis?		29	3	18	2 1	1	3 0	1	No relevant systematic reviews, scoping reviews or guidelines identified.		
		Cures would be areat but more research into self management					_		+			
		What treatments are there & are there any exercises or anything that can be done at home?	1		x x			1 1		1		
		You have said it above . Treatments please , self help techniques , rehab , and support to prevent it being the invisible prison it			×					1		
		has become for me.			1		-		-	-		
		Tips and ideas to help cope in everyday environments. Where to set Self help techniques.		l	+		+	x x	+	1		
		Students that I have had become quite isolated and struggle to cope at times. Information on coping stratergies would help			1					1		
		Students that I have had become quite isolated and struggle to cope at times. Internation on coping strategies would help them. Even self help group therapy to share experiences with others would help a great deal.	1	l	1	1 1	1	×	1			
		Devices for self management need to be available		l	×		+	 	+	1		
		What can I do to get relief?	1		×			1 1		1		
		stratges to help to lesson the symptoms			x]		
		I want to know all there is to know, why does this happen, will it always be there, how can I help myself because asking			×	l I —		1 1	1			
		someone else takes far too much time Apart from avoiding obvious noisy places -what day to day things could one do by oneself?			×	 	_		-	1		
		is there anything at all that Hyperacusis people can do to reduce the effects of Hyperacusis	1		×			1 1		1		
		What is the best form of self management?		x]		
		What can people do for themselves to best overcome hyperacusis			x		-	l	-	-		
		What are the techniques most likely to help? What can I do in my own time while I wait for the professional treatment to start, to speed up recovery?		l	×		+	 	+	1		
		Once root cause his been established, how effective is this in helping with coping mechanisms	1	×				1 1		1		
		Do helpine techniques improve the quality of life and allow the sufferer			х]		
		Do helpine techniques allow the sufferer to be involved more in society		_	x	1 - 1 -	_	1 1	_	1		
		What techniques have the best outcome. Self-manaement and what approach is best.		×	×	 	+	1	1	1		
		Could there be an easily accessible self-management programme?			×					j		
		self bela to reduce symptoms???							×			
		What kind of therapy would be available to help to desensitise people with the condition, or coping strategies given to help to	1	1	1	x x	1		1	1		
		live with it.				^						
		lose with it. How silo I treat it on my own? What can I do to treat it? My ent doctor is not taking my problems seriously and there is no			x							
		Jion with it. How with treat it on my own? What can I do to treat it? My ent doctor is not taking my problems seriously and there is no audiclarist near where I lion.			x							
		lose with it. How silo I treat it on my own? What can I do to treat it? My ent doctor is not taking my problems seriously and there is no				×						