Sound Hypersensitivity Interview

Use only if the person has already reported a sound hypersensitivity problem.

<u>Instructions:</u> You said that some sounds are uncomfortable for you when they seem normal to other people around you. We refer to this discomfort as **difficulty tolerating sound**. When you answer each question, think back to how you have been doing over the last week or so.

1. Do you wear hearing aids?

No – go to Question 2 Yes

(If YES) Are everyday sounds too loud when you are wearing your hearing aids?

No Yes

(If YES) Are everyday sounds too loud when you are not wearing your hearing aids?

No

Yes

[Note: If the sound tolerance problem appears to be caused by sounds amplified by hearing aids, consider making compression, maximum power output (MPO), and/or other adjustments to the aids to improve comfort. If not bothered by sound when unaided, then it is possible that all that is needed is to adjust the hearing aids for comfort. Consider making the hearing aid volume manually controlled.]

2. Is there anything you *want* to be doing, but *are not* doing because of difficulty tolerating sound?

3. Have you used any of the following to help with difficulty tolerating sound? If so, please indicate how helpful on a scale of 0 to 10. ("0" = not at all; "10" = extremely helpful)

Using backgr	round s	sound									
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Gradually lis	stening	to the t	ypes of	sounds t	hat are u	incomfo	rtable to	get used	d to the	n	
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Relaxation te	echniqu	ies									
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Medications											
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Counseling											
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Lifestyle cha	inges to	o create	quieter	environ	ments						
How helpful?	0	1	2	3	4	5	6	7	8	9	10
Other				_							
How helpful?	0	1	2	3	4	5	6	7	8	9	10

. How much (much as yo		-	ting sou	nd affe	et you	r life? ('	`0` '=	not at a	<i>ell</i> ; "10" =	= as
0	1	2 3	4	5	6	7	8	9	10	
-	tegories tha	Is are bothen t apply; circle ategory selecte	any sounds	s identifie	ed as a j	problem; v	write in	any add	itional sou	
High-pitched	sounds (s	queals, squea annoying;	iks, beeps	, whistle	s, rings	8,	101101	overw	halming	Lavoi
_				e angry,	man		lious,	overw	nenning,	1 avon
Comments			o. next do	or music						
Low-pitched too loud;					mak	e me anx	ious;	overw	helming;	I avoid
		da (
Traffic (warn too loud:	-	annoying;					-	-		
	-	s,		· ····B· J ,			,			1
Traffic (back				d constru	iction.	diesel en	gines.	garhage	e trucks.	
		annoying;								
Comments	5:									
Other backgr					ty nois	se, sportii	ng eve	nts,		
		annoying;								
Comments	s:									
Sudden-impa	ct sounds	(door slam, o	car backfii	ring, obj	ects dr	opping of	n floor	, dishes	clattering	,
too loud;	painful;	annoying;	make m	e angry;	mak	e me anx	ious;	overw	helming;	I avoi
Comments	s:									
Voices (televi									•	·
too loud;	painful;	annoying;	make m	e angry;	mak	e me anx	ious;	overw	helming;	I avoi
Comments	· · · · · · ·									
Oral (mouth)							•		1	
	-	annoying;						overw	neiming;	I avoi
Comments	s:			•						
Nasal (nose) s too loud;	sounds (sn	annoving:	ng, breath	ing, sno e angry:	rtıng, _ mək	e me anv	ious	overw	helmina	Lavoi
								0,01,0	nenning,	1 avoi
Human-move	5:	nds (non alia	ling woo		nkling	tuning	fact to	nning f	in cor chor	ning
		annoying;		-	-	• • •				
Comments	s:									
Other: too loud;	1	· · · ·	1		. 1		•		1	T. '
too loud;	paintul;	annoying;	make m	e angry;	mak	te me anx	lious;	overw	nelming;	I avoi
Comments	s:									

6. During each of these activities, how often is difficulty tolerating sound a problem?

(Check *avoid* if the activity is avoided due to difficulty tolerating sound; if an activity is avoided, two boxes can be checked for that activity)

	Never	Rarely	Sometimes	Often	Always	N/A	Avoid
Concerts							
Watching movies in a theater							
Watching TV or movies at							
home							
Shopping							
Going to restaurants							
Attending religious services							
Work responsibilities							
Day-to-day responsibilities							
outside of work							
Driving							
Housekeeping activities							
Childcare							
Social activities							
Participating in or observing							
sports events							
Participating in or observing							
performances							
Hobbies							
Sharing meals with others							
Attending class (in person)							
Attending medical							
appointments							

7. How much time do you spend in quiet or silence?

None or very little A small amount A moderate amount A large amount of time Most of the time All of the time

8. Have you been diagnosed with any of these health conditions that sometimes cause difficulty tolerating sound?

Post-traumatic stress disorder (PTSD) Anxiety disorder Autistic spectrum disorder Head injury (concussion, traumatic brain injury) Sleep problems Depression Migraines Other_____

9. Do you ever use earplugs or earmuffs?

No \rightarrow Interview is complete

Yes

(If YES) What percentage of your awake time do you use earplugs or earmuffs? _____%

(If YES) Do you ever use earplugs or earmuffs in fairly quiet situations?

No Yes

[Note: Some people have difficulty understanding the point of this question. Another way to phrase it is: "Do you ever use earplugs or earmuffs because sounds are too loud for you when they seem normal to other people around you?" The concern is that people with sound tolerance problems may wear hearing protection in fairly quiet situations out of fear that they will encounter an uncomfortably loud sound. That behavior may be considered overprotecting ears, and may cause the sound tolerance problem to worsen. These people need to understand that use of hearing protection may lead to greater sensitivity to sound, which would exacerbate their sound tolerance problem.]

(Is this a situation of overprotecting ears due to problems with sound tolerance?) No Yes

Instructions for Using the Sound Hypersensitivity Interview

The Sound Hypersensitivity Interview (SHI) is mostly self-explanatory. The clinician reads to the patient the instructions that appear at the beginning of the SHI, and then reads each question (and response choices) in sequence. Notes to clinicians are embedded with some of the questions to provide clarification regarding the intent of the question, and to explain how to interpret potential responses.

The different sound hypersensitivity disorders include <u>loudness hyperacusis</u>, <u>pain hyperacusis</u>, <u>misophonia</u>, <u>noise sensitivity</u>, <u>and phonophobia</u>. It is essential to understand how these disorders differ. It is often the case that multiple sound-hypersensitivity disorders occur simultaneously. The definitions below can help to guide your impressions as you talk through the SHI questions.

Loudness hyperacusis = the experience of uncomfortable-to-unbearable physical sensations (exclusive of burning, stabbing, jabbing pain) in the ears and/or head when exposed to any sound that reaches a certain intensity level that would not be uncomfortable for the average person.

This definition is the basis for making a diagnosis of loudness hyperacusis, which is characterized by a person's inability to tolerate the loudness of sounds that are easily tolerated by the average person. Loudness hyperacusis involves often indescribable sensations of physical discomfort in the ears and/or head that would not normally be described as "burning, stabbing, jabbing pain." Some of the sensations might involve an unpleasant sense of fullness in one or both ears (like a balloon being blown up inside the ear), dull ear ache, and headache. Any of these characteristic physical sensations of loudness hyperacusis would meet some definitions of pain. For purposes of diagnosing a sound hypersensitivity disorder, however, it is critical to use this working definition because loudness hyperacusis is very different from pain hyperacusis.

Pain hyperacusis = the experience of burning, stabbing, jabbing pain in the ears or head when exposed to, and/or following, any sound that reaches a certain intensity level that would not be uncomfortable for the average person.

Both loudness hyperacusis and pain hyperacusis are defined by physical reactions to sound at intensity levels that would not be uncomfortable for most people. The main distinction is how the physical reactions are described. For loudness hyperacusis they are described as intolerance, hypersensitivity, discomfort, etc. Pain hyperacusis is described as burning, stabbing, jabbing, sharp, excruciating, burning acid, stabbing knife, hot pokers, etc. Pain hyperacusis also results in delayed or prolonged pain.

The distinctions can be difficult to make because of how people describe their symptoms. Use of the word "pain" can be a source of confusion, requiring clarification to know exactly what is meant by the individual. It can be helpful to think of loudness hyperacusis as a disorder caused by increased auditory gain, and pain hyperacusis as caused by pain receptors in or near the ear. Pain hyperacusis would also be a generally more severe disorder than loudness hyperacusis

Misophonia = strong negative emotional responses (anger, irritation, disgust, anxiety, rage), physiological responses (increased muscular tension, increased heart rate, sweating), and behavioral responses (agitation, aggression) to "trigger" sounds (most often made by the mouth and nose; also other human-made sounds, sounds of objects like ticking clocks, animal sounds) and occasionally visual triggers (jiggling or swinging legs, watching someone eat).

Although the word misophonia literally means *hate sound*, this translation is misleading, because the essence of the disorder is reactions to certain sounds, not hypersensitivity to all sounds. The disorder can involve reactions to visual stimuli, but they are predominantly triggered by sounds—most commonly oral and nasal sounds. Other sounds that have been suggested as possible trigger sounds include kissing, finger tapping, nail clipping, footsteps, keyboard typing, pen clicking, glasses clinking, rustling of paper or plastic, loud human voices, babies crying, noisy neighbors, traffic, household appliances, dogs barking, and claws clicking. Clearly, some of these sounds may just reflect common annoyance from everyday sounds. It is always essential to conduct a comprehensive assessment to avoid misdiagnosing misophonia based on common annoyance.

Noise sensitivity = hypersensitivity to usual sounds that are interpreted as unwanted "noise" and cause annoyance, tension, anxiety, fear, isolation tendency, and/or anger, accompanied by physical reactions such as irregular heartbeat.

As for misophonia, it can be easy to misdiagnose noise sensitivity based on a person's complaint of sound being annoying. Everyone is annoyed by some sounds but that does not mean they have a sound hypersensitivity disorder. To diagnose noise sensitivity, the person should have a problem that would be described by its definition; and the problem should have at least a "minimal but significant interference with normal life activities," which would describe a "mild" disorder. It needs to be emphasized that fulfilling the description of the working definition is less important than the degree to which the disorder impacts the person's life.

Phonophobia = an irrational, excessive, persistent state of fear that either specific sounds or sound in general will cause discomfort, distress, or pain.

The key features of phonophobia are that it is an actual phobia and the main problem lies in the person's irrational fear that sound will cause discomfort, pain, and/or distress. When diagnosing sound hypersensitivity disorders, it is most helpful to consider loudness hyperacusis and pain hyperacusis as disorders of physical discomfort. The physical discomfort can lead to emotional reactions, which would not be considered phonophobia—but could lead to phonophobia. Misophonia and noise sensitivity are by definition emotional disorders, and they also can lead to phonophobia. Phonophobia is a unique emotional disorder.

Diagnosis—sound hypersensitivity disorder(s):

- Loudness hyperacusis
- □ Pain hyperacusis
- □ Misophonia
- □ Noise sensitivity
- Phonophobia
- □ None

Comments: