

8TH INTERNATIONAL CONFERENCE ON HYPERACUSIS AND MISOPHONIA



www.ichm8.org

8th International Conference on Hyperacusis and Misophonia

in conjunction with the

70th International Congress
of Hearing Aid Acousticians
14 to 16 October 2026

2026



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INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA



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OPENING ADDRESS

Dr Hashir Aazh

President, ICHM8

Hashir International Institute, United Kingdom



Welcome to the 8th International Conference on Hyperacusis and Misophonia (ICHM8), taking place from 14–16 October 2026 in Hanover, Germany. On behalf of the organising committee, it is our great pleasure to welcome researchers, clinicians, students, and individuals with lived experience from around the world to this important gathering dedicated to advancing the understanding and management of decreased sound tolerance disorders.

Over recent years, there has been increasing scientific and clinical recognition that conditions such as hyperacusis, misophonia, and noise sensitivity represent complex and multidimensional phenomena that cannot be fully understood through a single disciplinary lens. These conditions involve interactions among auditory processing, neural plasticity, emotion, cognition, attention, behaviour, context, and social experience. As a result, meaningful progress requires dialogue across disciplines, methods, and perspectives. ICHM8 has been designed with this spirit in mind.

The conference begins by examining fundamental questions surrounding loudness hyperacusis, noise sensitivity, and auditory gain, including keynote contributions exploring the possible roles of efferent pathways and central auditory plasticity. Psychological models and interventions are then considered through sessions dedicated to the psychological dimensions of hyperacusis and

misophonia, including cognitive behavioural approaches and the broader conceptualisation of distress associated with sound intolerance.

A distinctive aspect of ICHM8 is its inclusion of philosophical and definitional discussions. One session is devoted entirely to the challenge of defining hyperacusis, misophonia, and noise sensitivity, drawing on both philosophical and clinical perspectives. This reflects an important recognition that scientific progress depends not only on data and methodology, but also on conceptual clarity regarding the phenomena being studied. The programme also highlights emerging work on neural biomarkers, psychoacoustic differentiation, and neurophysiological mechanisms. Sessions addressing OPM-MEG, neural profiling, multimodal neuroimaging, and auditory processing reflect growing efforts to identify measurable characteristics that may improve classification and guide future interventions. Alongside these mechanistic approaches, the conference places strong emphasis on clinical care, including interdisciplinary treatment models, counselling, sound therapy, hearing aid applications, and approaches for children and individuals with complex presentations.

Pain hyperacusis receives particular attention this year through a dedicated session examining symptom fluctuations, trigeminal and middle-ear mechanisms, tensor tympani syndrome, and novel treatment approaches.

OPENING ADDRESS

Professor Gerhard Goebel

Honorary President, ICHM8

Tinnitus and Hyperacusis Center at the Neurocenter Prien, Prien am Chiemsee, Germany



This reflects increasing international interest in understanding pain-related auditory phenomena and their implications for both research and patient care.

Another important strength of ICHM8 is the integration of poster spotlight presentations into the main scientific programme. These concise presentations provide visibility to emerging researchers and innovative work spanning psychometrics, sensory traits, cognition, cultural influences, screening tools, and integrative theoretical models.

Finally, the conference concludes with sessions exploring psychosocial and clinical profiles associated with decreased sound tolerance, including attachment, loneliness, emotional characteristics, and cross-cultural psychometric validation. Together, these discussions reinforce the importance of considering the lived human experience alongside biological and behavioural mechanisms. Building on decades of international collaboration in the field, we hope that ICHM8 fosters collaboration, critical reflection, and new ideas that will contribute to improved understanding and care for individuals affected by hyperacusis, misophonia, and related conditions.

We warmly welcome you to Hanover and thank you for being part of ICHM8.

DAY 1

8th International Conference on Hyperacusis and Misophonia (ICHM8)



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Wednesday, October 14, 2026

time	Title of Presentation	Presenter	Affiliation
9:00	Doors Open		
09:15–09:45	Welcome & Opening Ceremony (Exhibition Hall)		
10:00–11:05	Session 1: Loudness Hyperacusis, Noise Sensitivity, and Auditory Gain		
10:00–10:10	Welcome and Introduction	Hashir Aazh and Gerhard Goebel	Hashir International Institute, United Kingdom and Tinnitus and Hyperacusis Center at the Neurocenter Prien, Prien am Chiemsee, Germany
10:10–10:45	Keynote Lecture: Possible Roles of the Efferent System and Central Plasticity in Loudness Hyperacusis	Brian Moore	University of Cambridge, United Kingdom
10:45–11:05	On the relationship between hyperacusis and noise sensitivity	Wolfgang Ellermeier	Technische Universität Darmstadt, Germany
11:05–11:35	Coffee Break		
11:35–12:30	Session 2: Psychology of Hyperacusis and Misophonia		
11:35–12:10	Keynote Lecture: Psychological models and approaches used in hyperacusis management	Gerhard Andersson	Linköping University, Sweden
12:10–12:30	Cognitive Behavioural Therapy (CBT) and Misophonia: A Cautionary Tale	Jaelline Jaffe	Private Practice, United States

DAY 1

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Wednesday, October 14, 2026

12:30–13:45	Lunch		
13:45–15:15	Session 3: Philosophical and Clinical Challenges in Defining Sound Intolerance		
13:45–15:15	How Should We Define Hyperacusis, Misophonia, and Noise Sensitivity?	Hashir Aazh, Kelly Jahn, Wolfgang Ellermeier, Karin Zimmer, Jamie Ward	Hashir International Institute, United Kingdom; The University of Texas at Dallas, United States; Technische Universität Darmstadt, Germany; Universität Vechta, Germany; University of Sussex, United Kingdom
15:15–15:45	Coffee Break		
15:45–17:00	Session 4: Behavioural and Contextual Perspectives on Misophonia		
15:45–16:05	Patterns of Reactivity in Misophonia: Profiles of Behavioural and Self-Reported Symptoms	Nico Remmert	Freie Universität Berlin, Germany
16:05–16:25	Contextual Influences on Misophonia: A Qualitative Exploration	Kate Raymond	Western University, Canada
16:25–16:45	I'm Right, You're Wrong: How Perspectives Affect Misophonia Lived Experience and Treatment Approaches	Jaelline Jaffe	Private Practice, United States
16:45–17:00	Panel Discussion / Q&A		
17:00	End of Day 1		

DAY 2

8th International Conference on Hyperacusis and Misophonia (ICHM8)



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Thursday, October 15, 2026

time	Title of Presentation	Presenter	Affiliation
09:30–10:45	Session 5: Neural Biomarkers and Mechanisms of Hyperacusis		
09:30–10:05	Keynote Lecture: What prevents us from achieving a breakthrough in the treatment of tinnitus & hyperacusis	Marlies Knipper	University of Tübingen, Germany
10:05–10:20	Use of OPM-MEG for differentiating tinnitus from hyperacusis	Rodrigo Donoso-San Martín	University of Tübingen, Germany
10:20–10:40	Distinct neural profiles underlying hyperacusis and noise sensitivity	Charlotte Bigras	Université de Montréal, Canada
10:40–10:45	Panel Discussion / Q&A		
10:45–11:15	Coffee Break		
11:15–13:00	Session 6: Clinical Interventions for Hyperacusis and Misophonia		
11:15–11:35	Hearing aids programmed as electronic filters in hyperacusis patients: candidacy, recommended protocols and outcomes in a case series	Myriam Westcott	University of Melbourne, Australia
11:35–11:55	Hyperacusis and Misophonia Are Treatable: Outcomes from an Individualized and Interdisciplinary Clinical Model	Heidi Sabatier-Olne	Hør, Norway

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11:55–12:15	Effectiveness of Remote Counselling and Sound Therapy for Hyperacusis	Ann Perreau	Augustana College, United States
12:15–12:35	Treatment for young children with misophonia	Jaelline Jaffe	Private Practice, United States
12:35–12:55	Sound therapy for hyperacusis following mild traumatic brain injury	Charlotte Bigras	Université de Montréal, Canada
12:55–13:00	Panel Discussion / Q&A		
13:00–14:15	Lunch		
14:15–15:00	Session 7: Differentiating Hyperacusis and Misophonia		
14:15–14:40	Keynote Lecture: AUDIDIAG: A new psychoacoustic tool to diagnose hyperacusis and misophonia	Arnaud J. Noreña	Aix-Marseille University, France
14:40–15:00	Profiles differentiating hyperacusis and misophonia in children with suspected auditory processing disorder	Ansar Uddin Ahmmed	Lancashire Teaching Hospitals NHS Foundation Trust, United Kingdom
15:00–15:30	Coffee Break		
15:30–17:00	Session 8: Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia (10-Minute Presentations)		
15:30–15:40	Distinguishing Hyperacusis from Tinnitus; Evaluating Sensorineural Encoding and Loudness Growth in Normal-Hearing Adults	Hannah Keppler	Ghent University, Belgium

DAY 2

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Thursday, October 15, 2026

<i>time</i>	<i>Title of Presentation</i>	<i>Presenter</i>	<i>Affiliation</i>
15:40–15:50	Audiological and Behavioural markers for Hyperacusis possibly identifiable with OPM-MEG	Marlon Deutscher	University of Tübingen, Germany
15:50–16:00	The neural bases of misophonia: a multimodal approach to examine structural and functional brain abnormalities at rest and during trigger exposure	Elisabeth Koch	University of Sussex, United Kingdom
16:00–16:10	Attention and Visual Distraction in Misophonia	Lige Luo	University of Sussex, United Kingdom
16:10–16:20	Hyperacusis and Related Sensory Traits in the Auditory Section of the Sensory Experiences Questionnaire 3.0: A Secondary Data Analysis from the Japanese Version Validity Study	Haruka Ito	University of Tsukuba, Japan
16:20–16:30	Hyperacusis in Chronic Tinnitus: an integrative review of auditory gain, salience processing and psychological mechanisms	Giovani de Oliveira	Universidade Católica de Pernambuco (UNICAP), Brazil
16:30–16:40	Cultural Specificity of Misophonia in the Japanese Population: Evidence from an Auditory-Based Experimental Approach	Yumi Yamazawa	Chuo University, Japan

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Thursday, October 15, 2026

16:40–16:50	Psychometric Properties and Sound-Response Profiles of Decreased Sound Tolerance Conditions	Mathilde Bauer	University of Salford, United Kingdom
16:50–17:00	Panel Discussion / Q&A		
17:00	End of Day 2		
19:00	EUHA Kongresstreff / Congress Party		

DAY 3

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Friday, October 16, 2026

time	Title of Presentation	Presenter	Affiliation
09:30–11:10 Session 9: Pain Hyperacusis: Mechanisms and Clinical Perspectives			
09:30–09:50	Characterizing Symptom Fluctuations and Setbacks in Pain Hyperacusis Over Time: Preliminary Results Using Ecological Momentary Assessment	Kelly Jahn	The University of Texas at Dallas, United States
09:50–10:10	The contribution of the middle ear and trigeminal nerve to specific sub-types of tinnitus and hyperacusis: An update.	Arnaud J. Noreña	Aix-Marseille University, France
10:10–10:30	The relationship between the self-reported frequency of sound-induced aural pain, as an indicator of pain hyperacusis, and uncomfortable loudness levels	Mahdi Azizi	Hashir International Institute, United Kingdom
10:30–10:50	Sound-induced pain in hyperacusis patients from a multidisciplinary clinical perspective: the role of Tensor Tympani Syndrome (TTS)	Myriam Westcott	University of Melbourne, Australia
10:50–11:10	Endoscopic tensor veli palatini botulinum toxin combined with clomipramine for treatment-refractory pain hyperacusis: a seven-patient case series	Michael Boedts	De Luisterkliniek, Belgium

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Friday, October 16, 2026

11:10–11:35 Coffee Break			
11:35–12:45 Session 10: Clinical, Psychometric, and Psychosocial Profiles in Hyperacusis and Misophonia			
11:35–11:55	A retrospective study of emotional and audiological characteristics of hyperacusis versus misophonia in children with auditory processing disorder (APD)	Sabarinath Vijayakumar	Royal Derby Hospitals, United Kingdom
11:55–12:15	Cross-language validation of the HIQ and SSSQ hyperacusis questionnaires in French, German, and Korean non-clinical adult samples	Karin Zimmer	Universität Vechta, Germany
12:15–12:35	Loneliness, Social Relations, and Attachment Styles in Misophonia	Simran Deep Singh	University of Sussex, United Kingdom
12:35–12:45	Q&A, Closing Discussion, and Announcement of ICHM9	Panel	
12:45	ICHM8 Ends		

SESSION 1

Loudness Hyperacusis, Noise Sensitivity, and Auditory Gain

Brian C. J. Moore

Department of Psychology, University of
Cambridge, Downing Street, Cambridge
CB2 3EB, United Kingdom

Keynote Presentation

14 October 2026
10:10 – 10:45



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Possible Roles of the Efferent System and Central Plasticity in Loudness Hyperacusis

For individuals with “loudness hyperacusis”, sounds with medium and high levels appear louder than normal. Two possible mechanisms underlying loudness hyperacusis are considered.

The first involves the efferent auditory system, which regulates the gain or amplification applied by the active mechanism within the cochlea. When determining loudness, the brain must take the role of the efferent system into account, probably through a mechanism known as “efference copy”. In response to sounds with medium or high intensity, the brain sends signals to the cochlea to reduce gain. If the efferent system operates less effectively than expected, the gain reduction may be insufficient, resulting in louder-than-normal sound perception. The effectiveness of the efferent system declines with increasing age, which may partly explain the increased prevalence of hyperacusis in older adults.

The second mechanism that may contribute to loudness hyperacusis is central auditory plasticity. This may be particularly relevant for individuals with hearing loss combined with loudness recruitment who do not use hearing aids. Such individuals may perceive many low- and medium-level sounds as

softer than normal. In response, the central auditory system may increase neural gain to compensate for reduced cochlear input. However, this increased central gain may be applied broadly across sounds of different intensities, causing moderately intense sounds to become unpleasantly loud, a characteristic feature of loudness hyperacusis.

Central plasticity may also play a role in individuals with cochlear synaptopathy (CS), involving the loss of synapses between inner hair cells and auditory neurons associated with noise exposure and ageing. Studies using noise-exposed animal models suggest that CS may lead to compensatory neural hyperactivity within the auditory brainstem.

Biography

Brian C. J. Moore is Emeritus Professor of Auditory Perception at the University of Cambridge. His research spans both basic and applied aspects of normal and impaired hearing, including hearing aid design and fitting.

He is a Fellow of the Royal Society, the Academy of Medical Sciences, the Acoustical Society of America, the British Society of Audiology, and the Audio Engineering Society, and an Honorary Fellow of both the Belgian Society of Audiology and the British Society of Hearing Aid Audiologists.

Professor Moore has written or edited 21 books and authored more than 800 scientific papers and book chapters. He has received numerous international honours and awards, including the Silver and Gold Medals of the Acoustical Society of America, the International Award in Hearing from the American Academy of Audiology, the Award of Merit from the Association for Research in Otolaryngology, the Hugh Knowles Prize from Northwestern University, the Life Achievement Award from the American Auditory Society, and an honorary doctorate from Adam Mickiewicz University, Poland.

He is also the wine steward of Wolfson College, Cambridge.

SESSION 1

Loudness Hyperacusis, Noise Sensitivity, and Auditory Gain

Wolfgang Ellermeier

Institut für Psychologie, Technische Universität Darmstadt, Germany

Oral Presentation

14 October 2026
10:45 – 11:05



Collaborators:

- Karin Zimmer, Universität Vechta, Germany
- Eunsung Song, ENTPE, Vaulx-en-Velin, France
- Catherine Marquis-Favre, ENTPE, Vaulx-en-Velin, France
- Sang Hee Park, KICT, Goyang, Republic of Korea



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On the Relationship Between Hyperacusis and Noise Sensitivity

Hyperacusis is characterised by an excessive and sometimes painful response to sounds and is generally regarded as a hearing disorder affecting a relatively small proportion of the population. In contrast, noise sensitivity, a concept developed primarily within the public health literature, is considered a psychological trait that varies across individuals, ranging from low sensitivity to extreme sensitivity to environmental noise. To investigate the relationship between these constructs, two hyperacusis questionnaires, the Hyperacusis Impact Questionnaire (HIQ) and the Sound Sensitivity Symptoms Questionnaire (SSSQ), together with the Weinstein Noise Sensitivity Scale (WNSS), were administered online to a non-clinical sample of 213 participants from Germany and Austria.

Analysis of the data demonstrated that total scores on the WNSS followed an approximately normal distribution, whereas scores on the HIQ and SSSQ were markedly skewed, with approximately one-third of participants reporting few or no hyperacusis symptoms. Correlations between the WNSS and the hyperacusis questionnaires yielded Kendall's tau_b values of .42 for the HIQ and .31 for the SSSQ.

In addition, both hyperacusis questionnaires showed moderate Spearman rank correlations, ranging from approximately 0.2 to 0.4, with retrospective ratings of noise annoyance across the previous 12 months for various environmental noise sources according to ISO/TS 15666 (2021). These correlations were of similar magnitude as those observed between noise sensitivity and annoyance ratings, but showed a different, less source-dependent pattern.

Overall, the findings suggest that hyperacusis and noise sensitivity represent distinct but overlapping constructs. Research funded by Fondation pour l'Audition (FPA) Paris, France; grant number FPA RD-2022-6.

Biography

Wolfgang Ellermeier is Professor Emeritus of Psychology at Technische Universität Darmstadt, Germany. His principal research interests include psychoacoustics, noise effects, psychophysical scaling, and mathematical psychology.

SESSION 2

Psychology of Hyperacusis and Misophonia

Gerhard Andersson

Department of Behavioral Sciences and Learning, Linköping University, Campus Valla, 58183 Linköping, Sweden

Keynote Presentation

14 October 2026
11:35 – 12:10



Psychological Models and Approaches Used in Hyperacusis Management

Learning from previous experiences (operant conditioning) plays an important role for many individuals with hyperacusis. Another important group of processes involves cognitions and beliefs. The presentation will also discuss the role of evaluative conditioning, which refers to learning to dislike stimuli, a characteristic feature of misophonia that may also occur in hyperacusis.

Attention and avoidance are two components of the experience that involve both behavioural and cognitive processes. One factor that is rarely considered in the clinical literature is the role of implicit learning. Humans learn a great deal without conscious awareness, and even experiences such as ear pain may not always be consciously processed. In other words, patients may not always be aware of when and why symptoms occur.

Regarding treatment, there is preliminary evidence that cognitive behavioural therapy may be beneficial. Motivation to engage in treatment is particularly important when gradual exposure is involved. The presentation will conclude with reflections on future directions in the field.

Biography

Professor Gerhard Andersson, Ph.D., is Professor of Clinical Psychology in the Department of Behavioural Sciences and Learning at Linköping University, Sweden. Throughout his career, he has combined academic research with part-time clinical work, primarily within audiology, including the assessment and management of patients with tinnitus and hyperacusis.

He also holds a part-time position as a clinical psychologist at the Hearing Clinic, Linköping University Hospital, where he is a member of the Tinnitus Team. Professor Andersson has published more than 940 research papers, 80 book chapters, and 20 books, and has supervised over 60 PhD students. In addition to his work in tinnitus and hyperacusis, he is internationally recognised for his contributions to digital psychological interventions, particularly internet-based cognitive behavioural therapy.



XV International
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LONDON 2027

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The 4th World Tinnitus Congress & XV International Tinnitus Seminar

**From Mechanism to Meaning
The ABC of Tinnitus**

SESSION 2

Psychology of Hyperacusis and Misophonia

Jaelline Jaffe

PO Box 1314, Studio City, CA 91614,
United States

Oral Presentation

14 October 2026
12:10 – 12:30



INTERNATIONAL CONFERENCE ON
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CBT and Misophonia: A Cautionary Tale

CBT (Cognitive Behavioural Therapy) is an evidence-based approach widely used to address a range of psychological difficulties. Given the large amount of information available about CBT, it may sometimes be approached mechanistically, as though following a set of steps will automatically produce successful outcomes. However, such an approach may lack personalisation and fail to address significant underlying factors. While the mechanisms of CBT may be helpful, there are important limitations when misophonia is associated with deeper psychological issues. Misophonia commonly presents with features that may also indicate more complex mental health conditions. For example, individuals with misophonia frequently exhibit high levels of perfectionism, rigidity, excessive preoccupation with rules, and harsh judgement of others. However, these features may also be associated with Obsessive Compulsive Disorder (OCD) or Obsessive Compulsive Personality Disorder (OCPD), which require assessment and management by mental health professionals.

Even in such cases, CBT alone may have limitations in the treatment of misophonia. The addition of approaches derived from DBT (Dialectical Behaviour Therapy) may help address emotional dysregulation commonly associated with misophonia. ACT (Acceptance and Commitment Therapy) may also

support exploration of existential and interpersonal aspects of the condition.

There is increasing evidence that misophonia is a neurological condition with complex psychological and psychosocial dimensions, including depression, anxiety, self-injury, and trauma history. Many mental health professionals now believe that misophonia may, in some cases, be associated with previously unrecognised trauma, which may be addressed using CPT (Cognitive Processing Therapy).

This presentation discusses common traits observed in individuals with misophonia and compares relevant comorbidities and mental health conditions. It also addresses potential limitations of audiologist-led or chatbot-led CBT approaches in the treatment of misophonia. Case studies illustrating the importance of collaboration between psychotherapists and audiologists in the management of misophonia, particularly when deeper underlying psychological factors are involved, will also be presented.

Biography

Jaelline Jaffe, Ph.D., LMFT, is a California-licensed marriage and family therapist with 50 years of experience as a psychotherapist, educator, and coach. She is a co-founder and board member of the Misophonia Association, which organises annual conventions for individuals and families affected by misophonia, and has treated many hundreds of people with the condition.

She has presented at every Misophonia Association convention since the first meeting in 2013, as well as at numerous professional conferences across the United States, London, and Warsaw.

Dr Jaffe is co-author of *The Heroic Journey: A Rite of Passage Program for adolescents*, used in Montessori middle schools across the United States, and *The Language of Emotional Intelligence* (McGraw Hill, 2008). In 2025, she published the training manual *These Sounds are Driving Me Crazy!* to support mental health professionals in the treatment of sound sensitivity disorders.

For 40 years, Dr Jaffe also worked in public schools as a teacher and counsellor. Drawing on this experience, she developed materials

for parents and children in *These Sounds are Driving our Family Crazy! Guidance for Parents of Children with Misophonia*.

Dr Jaffe's websites are www.LemonAidCounseling.com and www.SensitiveToSound.com.

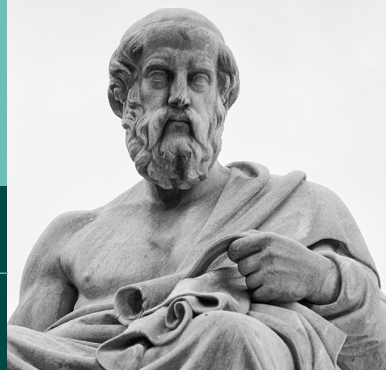
SESSION 3

Conceptual and Philosophical Foundations of Sound Intolerance

Panel Discussion

Panel Discussion

14 October 2026
13:45 – 15:15



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

How Should We Define Hyperacusis, Misophonia, and Noise Sensitivity?

Definitions are often treated as secondary to empirical research. Yet, in many scientific fields, attempts at definition reveal the extent of what remains conceptually uncertain. Research into sound intolerance conditions may now be approaching such a moment. Hyperacusis, misophonia, and noise sensitivity are increasingly investigated across audiology, psychology, neuroscience, psychiatry, public health, urban planning, and environmental studies, yet substantial disagreement remains regarding their boundaries, core features, mechanisms, and overlap. In some cases, we may only realise that we do not fully understand a phenomenon when we attempt to define it precisely.

At the centre of the discussion lies a classical philosophical and scientific question: what characteristics are shared by all instances of a condition, and only that condition? In other words, which features are necessary for identifying a condition, and which uniquely distinguish it from related constructs? Addressing these questions may prove essential for improving diagnostic clarity, phenotyping, epidemiology, biomarker research, and treatment development.

This session will examine the conceptual foundations of these constructs and ask

a deceptively simple question: what is a definition? Discussions will explore the distinction between essential definitions, which attempt to identify the necessary and unique features of a condition, and extensional definitions, which define concepts through examples, prototypes, or characteristic presentations. The session will also consider the relevance of classical philosophical perspectives, including Platonic discussions concerning the search for essences underlying observable variation, alongside broader epistemological questions related to categorisation and scientific language.

The discussion further recognises that terminology shapes scientific reasoning. As Wittgenstein suggested, the limits of language may also become the limits of understanding. Without conceptual clarity, progress in phenotyping, epidemiology, biomarker discovery, and treatment development may remain constrained.

This interdisciplinary panel brings together expertise from audiology, neuroscience, psychoacoustics, psychology, and clinical practice to explore how sound intolerance conditions should be defined, differentiated, and understood in the years ahead.

Speakers:

- **Hashir Aazh**, Hashir International Institute, United Kingdom
- **Kelly Jahn**, The University of Texas at Dallas, United States
- **Wolfgang Ellermeier**, Technische Universität Darmstadt, Germany
- **Karin Zimmer**, Universität Vechta, Germany
- **Jamie Ward**, University of Sussex, United Kingdom

SESSION 4

Behavioural and Contextual Perspectives on Misophonia

Nico Remmert

Freie Universität Berlin, Department of Education and Psychology, Methods and Evaluation/Quality Assurance, Berlin, Germany

Oral Presentation

14 October 2026
15:45 – 16:05



Collaborators:

- **Mercedes Woolley**, Utah State University, Department of Psychology, United States of America
- **Marta Siepsiak**, SWPS University, Faculty of Psychology, Warsaw, Poland
- **Michael Twohig**, Utah State University, Department of Psychology, United States of America
- **Steffi Pohl**, Freie Universität Berlin, Department of Education and Psychology, Methods and Evaluation/Quality Assurance, Berlin, Germany



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Patterns of Reactivity in Misophonia: Profiles of Behavioural and Self-reported Symptoms

Individuals with misophonia experience intense affective reactions to specific trigger sounds and commonly cope by avoiding triggering situations. Although increasing consensus exists regarding the presentation of misophonia, symptom expression varies considerably across individuals. Differences occur not only in the intensity of affective reactions, but also in coping behaviours, particularly anticipatory avoidance aimed at preventing exposure and reactive avoidance involving escape from ongoing exposure.

Previous subgroup research has primarily identified severity-based profiles, which may confound symptom intensity with distinct patterns of response. Moreover, such approaches have largely relied on self-report measures and may therefore fail to capture the situational nature of misophonic reactions. More recent research suggests that individuals may differ in the functional characteristics of their responses, potentially reflecting reactive and anticipatory profiles, although stronger empirical evidence is still required.

This study investigated heterogeneity in affective reactivity in misophonia using both self-report measures and standardised behavioural assessment through the Misopho-

nic Behavioural Avoidance Test (M-BAT). The study proposes that misophonia is characterised by distinct profiles involving varying combinations of anticipatory avoidance, reactive escape, and emotional responses, and that these profiles may differentially relate to clinical outcomes.

Using dispositional self-report measures alongside behavioural indicators, the study aimed to: (a) identify subgroups using Gaussian mixture modelling based on reactivity indicators, (b) examine correspondence between behavioural and self-report measurement methods, and (c) investigate differences in clinical outcomes across identified profiles.

By integrating behavioural and self-report data and focusing specifically on patterns of reactivity rather than symptom severity alone, this study aims to contribute to a more differentiated understanding of misophonia and support the development of improved assessment methods and targeted interventions.

Biography

Nico Remmert is a researcher and fifth-year PhD candidate in Psychology at Freie Universität Berlin, specialising in the Department of Methods and Evaluation/Quality Assurance. He completed his MSc in Clinical Psychology at Freie Universität Berlin in 2020.

His research focuses on advancing psychometric approaches for assessing misophonia, with particular emphasis on understanding avoidance behaviour through the analysis of process data.

SESSION 4

Behavioural and Contextual Perspectives on Misophonia

Kate Raymond

Western University, London, Ontario,
Canada

Oral Presentation

14 October 2026
16:05 – 16:25



Collaborators:

- **Blake Butler**, Western University, London, Ontario, Canada
- **Neeka Farahi**, Western University, London, Ontario, Canada



INTERNATIONAL CONFERENCE ON
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Contextual Influences on Misophonia: A Qualitative Exploration

Misophonia does not manifest uniformly, and responses to the same trigger sound may differ considerably across individuals and situations. Emerging research suggests that these responses are shaped not only by the acoustic properties of trigger sounds, but also by how such sounds are appraised within specific contexts. Qualitative approaches may therefore help centre lived experience and capture the complexity and heterogeneity of contextual influences on misophonia.

This study aimed to qualitatively explore how internal states and external environmental conditions shape the misophonic experience. A secondary aim was to identify what individuals with misophonia would like others to better understand about the condition.

Semi-structured interviews were conducted with 60 participants who self-identified as experiencing specific sound sensitivities. Interviews explored experiences across personal, environmental, and cultural contexts. Data were analysed using thematic analysis, with coding conducted by two raters who themselves identify as having misophonia, thereby contributing lived experience perspectives to the interpretive process.

Analysis is ongoing. Preliminary findings suggest that individuals with misophonia experience their responses as highly context dependent. Participants also highlighted common misconceptions surrounding misophonia and emphasised the importance of improving public awareness and understanding of the condition.

Biography

Kate Raymond is a PhD candidate in Clinical Psychology at Western University, Canada. Her research focuses on understanding variability in the misophonic experience, with particular interest in how contextual factors influence responses to trigger sounds.

SESSION 4

Behavioural and Contextual Perspectives on Misophonia

Jaelline Jaffe

PO Box 1314, Studio City, CA 91614,
United States

Oral Presentation

14 October 2026
16:25 – 16:45



I'm Right, You're Wrong: How Perspectives Affect Misophonia Lived Experience and Treatment Approaches

"You're chewing too loud!" "No, I'm not!"
"Yes, you are, and you're doing it on purpose
because you know how much I hate it!"

Differences in perspective do not necessarily mean that one person is right and the other is wrong. However, differing perspectives can contribute to conflict, distress, and tension within families and relationships, and may also influence approaches to treatment.

Individuals with misophonia and those around them often struggle to communicate effectively because they experience situations from very different points of view. Misophonia is an invisible condition, which can make it difficult for others to fully understand its impact. At the same time, the way individuals with misophonia interpret and frame their experiences may influence the degree of distress they experience. Helping patients recognise alternative perspectives may support progress in managing misophonia. For example, viewing the condition as "the worst thing that could happen" may contribute to frustration and depression, whereas recognising that it is difficult but manageable may reduce emotional distress to some extent.

In addition to the interpersonal dynamics affecting patients, professionals must also remain aware of their own assumptions and biases. Different perspectives regarding the underlying nature of misophonia may lead to very different treatment approaches. If misophonia is conceptualised primarily as an auditory processing disorder, treatment may focus on sound therapy. If it is viewed as a cognitive learning problem, CBT-based approaches may be emphasised. If it is conceptualised as a conditioned reflex, counterconditioning strategies may be used. If trauma is considered central, treatment may focus on somatic psychotherapy and memory reconsolidation approaches.

Using clinical examples and visual illustrations, this presentation explores how perspectives shape individual experiences, relationships, and treatment approaches in misophonia. The session also discusses how families affected by misophonia may improve communication, expectations, and long-term coping by reconsidering the assumptions and judgements they hold about one another and the condition itself.

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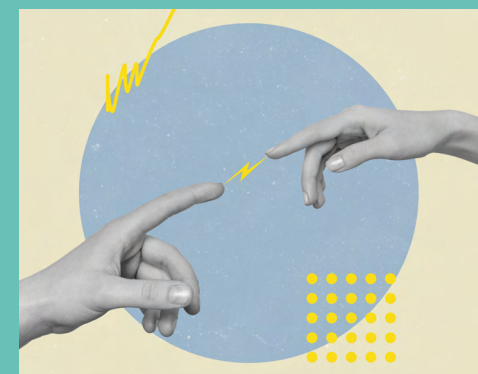
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SESSION 5

Neural Biomarkers and Mechanisms of Hyperacusis

Marlies Knipper

Department of Otolaryngology, Head and Neck Surgery, Tübingen Hearing Research Center (THRC), Molecular Physiology of Hearing, University of Tübingen, Tübingen, Germany

Keynote Lecture

14 October 2026
9:30 – 10:05



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

What Prevents Us from Achieving a Breakthrough in the Treatment of Tinnitus and Hyperacusis?

Despite high medical costs and starting discussions about an increased risk of early-onset dementia associated with tinnitus and hyperacusis, causal therapies for these conditions are still widely considered unavailable. This perception persists despite the existence of generally accepted views regarding the neural correlates of tinnitus. In particular, two major perspectives currently dominate tinnitus research: (i) tinnitus is associated with central subcortical hyperexcitability, and (ii) tinnitus is linked to altered alpha and low-gamma oscillatory activity at rest.

A major obstacle to therapeutic progress may be the limited integration between these two research perspectives. The present lecture discusses findings demonstrating both neural correlates, namely peripheral hyperexcitability and altered brain oscillations, within the same tinnitus cohort. These findings are further compared across individuals with tinnitus alone, tinnitus combined with hyperacusis, and hyperacusis without tinnitus.

The lecture also explores the potential value of innovative optically pumped magnetometer magnetoencephalography (OPM-MEG) imaging techniques for the objective identification of cortical alterations associated with

tinnitus and hyperacusis. Initial therapeutic approaches emerging from these findings may also be discussed where appropriate.

The presentation emphasises that more rapid therapeutic progress for individuals affected by tinnitus and hyperacusis may depend on greater openness and collaboration among scientific groups. Existing evidence from multiple research teams may already provide sufficient consensus regarding key neural correlates to support the development of more successful targeted therapies.

This work was supported by Deutsche Forschungsgemeinschaft grants DFG KN 316/13-1 and DFG RU 713/6-1, ERA-NET NEURON JTC 2020: BMBF 01EW2102 CoSy-Speech, and FWO G0H6420N.

Biography

Marlies Knipper has been Professor at the Hearing Research Center of the Ear, Nose and Throat Clinic, Eberhard Karls University of Tübingen, since 2008 and has led the Molecular Hearing Physiology research group since 1993.

She has worked in the field of hearing research for more than 30 years, with research contributions spanning auditory processing disorders, age-related hearing loss, auditory neuropathies, tinnitus, hyperacusis, and the relationship between hearing and cognition. Her work has also focused on developing infrastructural platforms to support cross-system sensory research.

Professor Knipper is a member of the Leopoldina – National Academy of Sciences (Halle/Saale) and the Leibniz-Sozietät der Wissenschaften zu Berlin.

Collaborators:

- **Rodrigo Donoso-San Martín**^{1,2}
- **Stefan Fink**¹
- **Wibke Singer**¹
- **Paul H. Delano**^{3,4}
- **Csaba Harasztosi**⁵
- **Tilman Sander-Thömmes**⁵
- **Stephan M. Wolpert**¹
- **Lukas Rüttiger**¹

Affiliations:

¹Department of Otolaryngology, Head and Neck Surgery, Tübingen Hearing Research Center (THRC), Molecular Physiology of Hearing, University of Tübingen, Tübingen, Germany

²Departamento de Neurociencia, Facultad de Medicina, Universidad de Chile, Santiago, Chile

³Departamento de Psiquiatría, Pontificia Universidad Católica de Chile, Chile

⁴Centro Interdisciplinario de Neurociencia UC, Pontificia Universidad Católica de Chile, Chile

⁵FB 8.21 Optical Magnetometry (Magnetoencephalography), PTB, Berlin, Germany

SESSION 5

Neural Biomarkers and Mechanisms of Hyperacusis

Rodrigo Andrés Donoso-San Martín

Department of Otolaryngology, Head and Neck Surgery, Hearing, Cognition and Tinnitus, University of Tübingen, Germany

Oral Presentation

15 October 2026
10:05 – 10:20



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Use of OPM-MEG for Differentiating Tinnitus from Hyperacusis

Hyperacusis co-occurs in more than 55% of individuals with tinnitus, yet it remains largely overlooked in clinical diagnostics and personalised therapeutic approaches. This study describes functional differences between healthy controls, individuals with tinnitus with and without hyperacusis, and individuals with hyperacusis alone.

In addition to standardised questionnaires and detailed audiometric assessments, including pure-tone audiometry (PTA) and auditory brainstem responses (ABR), the study investigated cortical responses evoked by auditory stimuli. Neural responses were recorded using a time-sensitive 64-channel optically pumped magnetometer magnetoencephalography system (OPM-MEG). Compared with conventional SQUID-MEG systems, OPM-MEG allows a shorter distance between sensors and the scalp, potentially improving the detection of hemisphere-specific lateralised signal differences.

To examine perceptual differences between groups, evoked cortical activity was analysed during an attention-demanding two-tone auditory discrimination task in both tinnitus and control participants. The approach aims to establish a more efficient diagnostic strategy for identifying distinct peripheral

and central contributions to tinnitus and hyperacusis.

The identification of functional biomarkers associated with distinct phenotypes may support the future development of more targeted and individualised therapeutic interventions.

This work was supported by ERA-NET NEURON JTC 2020: BMBF 01EW2102 CoSy-Speech and the Tübingen Research Take Off Program (TRT) of the Brasilien-Lateiname-rika Zentrum, University of Tübingen.

Biography

Rodrigo Andrés Donoso-San Martín is a PhD student in the laboratory of Professor Marlies Knipper and Professor Lukas Rüttiger at the University of Tübingen, Germany, where he has been based since December 2024. He is completing his PhD in collaboration with Professor Paul Délano at the University of Chile, Santiago, where he previously completed a Bachelor's degree in Mathematics and a Master's degree in Biological Neuroscience.

Collaborators:

- **Stephan M. Wolpert**¹
- **Stefan Fink**¹
- **Paul H. Délano**²
- **Christoph Braun**³
- **Lukas Rüttiger**¹
- **Marlies Knipper**¹

Affiliations:

¹Department of Otolaryngology, Head and Neck Surgery, Hearing, Cognition and Tinnitus, University of Tübingen, Germany

²MEG-Center, University of Tübingen, Germany

³Laboratorio Neurobiología de la Audición, Departamento de Neurociencia, Facultad de Medicina, Universidad de Chile, Santiago, Chile

SESSION 5

Neural Biomarkers and Mechanisms of Hyperacusis

Charlotte Bigras^{1 2 3}

School of Speech-Language Pathology and Audiology, Faculty of Medicine, Université de Montréal, Canada

Oral Presentation

15 October 2026
10:20 – 10:40



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Distinct Neural Profiles Underlying Hyperacusis and Noise Sensitivity

Hyperacusis and noise sensitivity are often conflated despite potentially distinct neurophysiological mechanisms. Sensory gating, defined as the brain's ability to suppress redundant auditory information, is commonly assessed using the EEG paired-click paradigm through P50 amplitude suppression. While altered sensory gating has previously been reported in individuals with high noise sensitivity, its role in hyperacusis remains unclear. This study investigated whether hyperacusis and noise sensitivity demonstrate distinct auditory sensory gating and cortical oscillatory patterns.

Thirty-eight adults with normal hearing were classified into hyperacusis (n=10), high noise sensitivity (n=13), or low noise sensitivity (n=15) groups. Auditory sensitivity was assessed using the Khalfa Hyperacusis Questionnaire, Weinstein Noise Sensitivity Scale, and loudness discomfort levels.

EEG was recorded from 32 channels during paired-click stimulation under passive and active listening conditions. Sensory gating was quantified using P50 amplitude suppression, and evoked and induced spectral power analyses were performed. Group differences and linear mixed models were examined.

Participants with hyperacusis demonstrated reduced P50 suppression across both conditions compared to high and low noise-sensitive groups, suggesting impaired sensory gating. They also exhibited elevated anticipatory induced alpha power before the first stimulus and sustained induced alpha and beta activity following the second stimulus, consistent with abnormal cortical excitability and prolonged inhibitory processing. In contrast, high and low noise-sensitive participants showed similar P50 suppression patterns, although both groups demonstrated a brief shift toward lower-frequency induced oscillations following the first stimulus, more pronounced in the high noise-sensitive group, indicating heightened responsiveness without sensory gating impairment.

Sensory gating deficits were most strongly predicted by hyperacusis complaint severity and anticipatory alpha activity. These preliminary findings suggest that hyperacusis and noise sensitivity involve distinct neurophysiological mechanisms. Hyperacusis appears to be associated with impairments in both bottom-up and top-down auditory inhibition, whereas noise sensitivity may reflect heightened responsiveness without inhibitory deficits. The findings highlight the importance of distinguishing these conditions in both

research and clinical practice to improve assessment and management approaches.

Biography

Charlotte Bigras is a clinical audiologist based in Québec, Canada. She completed her PhD at the Université de Montréal under the supervision of Dr Sylvie Hébert and Dr Victoria Duda, where her research focused on hyperacusis and noise sensitivity with the aim of improving their understanding, assessment, and management.

Her doctoral research examined electrophysiological markers, self-report measures, psychoacoustic tasks, and sound therapy, particularly in the context of traumatic brain injury. She is currently a postdoctoral researcher at Concordia University in the Hearing and Cognition Laboratory under the supervision of Dr Mickael Deroche.

Her current research focuses on listening effort and the cognitive dimensions of sound tolerance conditions, with the goal of better differentiating hyperacusis and noise sensitivity.

Collaborators:

- Sayeed Devraj-Kizuk³
- Thomas Larochelle¹
- Sylvie Hébert^{1 2 3}
- Victoria Duda^{1 3}

Affiliations:

¹School of Speech-Language Pathology and Audiology, Faculty of Medicine, Université de Montréal, Canada

²Interdisciplinary Research Center on the Brain and Learning (CIRCA), Canada

³Interdisciplinary Research Center on Rehabilitation in Metropolitan Montreal (CRIR), Canada

SESSION 6

Clinical Interventions for Hyperacusis and Misophonia

Myriam Westcott

University of Melbourne, Australia

Oral Presentation

15 October 2026

11:15 – 11:35



Collaborators:

- Katherine Moore, DWM Audiology, Australia
- Philippa James, DWM Audiology, Australia
- Courtney Tatnell, DWM Audiology, Australia



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Hearing Aids Programmed as Electronic Filters in Hyperacusis Patients: Candidacy, Recommended Protocols and Outcomes in a Case Series

Loud and impulsive sounds, particularly when unexpected, are intolerable for many individuals with hyperacusis. Multiple simultaneous sounds, digital sounds, low- and high-frequency sounds, sounds close to the ears including one's own voice, and tactile stimulation of the ears may also be poorly tolerated.

In this case series, hearing aids were programmed to function as electronic auditory filters for patients with severe hyperacusis, with the aim of reducing the impact of trigger sound exposure. Five patients also presented with significant sensorineural hearing loss in addition to hyperacusis and had previously been unable or unwilling to tolerate hearing aid amplification.

To minimise the risk of symptom exacerbation, clinical red flags were identified and protocols for evaluating candidacy were developed. Analysis of each patient's specific sound triggers informed candidacy assessment, personalised hearing aid selection across different manufacturers, and targeted programming strategies. In all cases, programming focused on reducing the impact of loud and impulsive sounds

while allowing gentle amplification of softer sounds to minimise occlusion effects and support communication.

To support desensitisation, sound enrichment was introduced through low-volume noise programmes where tolerated, and patients were encouraged to progressively reduce reliance on filtering.

Regular hearing aid use and positive outcomes were reported. Patients described feeling safer, experiencing improvement in hyperacusis symptoms, gaining greater control over their acoustic environment, and reporting reduced auditory vigilance and anticipatory anxiety. They reported expanded lifestyle horizons and increased social participation. Patients with both hearing loss and hyperacusis were able to gradually tolerate and adapt to amplification.

Factors contributing to poorer outcomes in other hyperacusis cases were also analysed. The findings suggest that hearing aids programmed as auditory filters may improve hyperacusis symptoms and quality of life while supporting ongoing desensitisation processes. However, careful evaluation of

candidacy and appropriate clinical protocols are essential to reduce the risk of symptom exacerbation.

Biography

Myriam Westcott has worked extensively with patients experiencing tinnitus, hyperacusis, and misophonia since 1995, and with individuals affected by acoustic shock and tensor tympani syndrome (TTS) since 2002. Her work aims to promote a clinically grounded understanding of these conditions based on lived experience, research, clinical insight, and treatment outcomes.

She has developed personalised, trauma-informed approaches to treatment incorporating Tinnitus Retraining Therapy (TRT), Cognitive Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT), central pain sensitisation research, and evidence-based pain management strategies.

Patients attended Myriam Westcott's online clinic at DWM Audiology from around the world. DWM Audiology has been recognised as a leading tinnitus, hyperacusis, and misophonia clinic in Australia, operating within

a multidisciplinary framework alongside a range of health and medical professionals. After 25 years as a clinic director, owner, and clinician, she recently retired from clinical practice.

As a consultant, she now provides online masterclasses, mentorship, lectures, training programmes, webinars, articles, and media interviews. Her research into hyperacusis, acoustic shock, and tensor tympani syndrome remains ongoing.

SESSION 6

Clinical and Experimental Perspectives on Hyperacusis and Misophonia

Heidi Sabatier-Olne

Hør Ullevål Stadion, Sognsveien 75F,
0855 Oslo, Norway

Oral Presentation

15 October 2026
11:35 – 11:55



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Hyperacusis and Misophonia Are Treatable: Outcomes from an Individualized and Interdisciplinary Clinical Model

We will present our methods and clinical outcomes in the treatment of hyperacusis and misophonia using Tinnitus Retraining Therapy (TRT), from an audiological perspective within a private clinic in Norway.

Our work is based on the neurophysiological model developed by Jastreboff. TRT is a structured clinical approach for the assessment and treatment of tinnitus and decreased sound tolerance (DST). Although our clinic also provides tinnitus treatment, this presentation will focus specifically on DST.

The presentation will include treatment approaches, anonymized case examples, and clinical outcome data demonstrating symptom reduction and functional recovery based on data collected from our clinic.

Our treatment population includes children from the age of seven, adolescents, and adults, as well as individuals with and without comorbid conditions such as autism spectrum disorder and ADHD.

We have observed favourable treatment outcomes for both hyperacusis and misophonia using the specific principles of TRT.

These findings and clinical experiences will be discussed further during the presentation.

Hyperacusis and misophonia remain subjects of ongoing debate regarding treatability. Based on our clinical experience, we believe that decreased sound tolerance can be successfully treated in both hyperacusis and misophonia, and we therefore consider it important to share our experiences.

Biography

Heidi Sabatier-Olne is a licensed audiologist with more than 20 years of clinical experience in hearing healthcare. She gained over a decade of experience in hospital and public ENT practice before joining Hør in 2017, where she specialised in tinnitus and decreased sound tolerance.

She completed advanced training in the Jastreboff method for tinnitus in 2017 and for decreased sound tolerance in 2018, and has worked extensively with patients experiencing tinnitus and decreased sound tolerance since 2019.

SESSION 6

Clinical Interventions for Hyperacusis and Misophonia

Ann Perreau

Augustana College, United States

Oral Presentation

15 October 2026

11:55 – 12:15



Collaborators:

- Austin Williamson, Augustana College, United States
- Forrest Stonedahl, Augustana College, United States
- Rich Tyler, University of Iowa, United States



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Effectiveness of Remote Counselling and Sound Therapy for Hyperacusis

This presentation reports findings from a United States clinical trial examining the development and effectiveness of Hyperacusis Activities Treatment-Online (HAT-Online), a remote counselling and sound therapy programme for individuals with hyperacusis.

A repeated-measures design was used, with the first four weeks serving as a baseline period prior to intervention. Participants then completed a four-week counselling programme consisting of educational videos, practical activities, and synchronous online discussions delivered in an interactive format. Following counselling, participants completed a four-week sound therapy intervention.

Participants were randomly assigned to one of two groups: (1) listening to everyday sounds that triggered hyperacusis, or (2) listening to low-level continuous background noise (white noise) delivered through sound generators. Both groups followed a customised successive approximation approach to gradually increase sound level and duration.

Hyperacusis symptoms and reactions were assessed using the Inventory of Hyperacusis Symptoms (IHS) and a psychoacoustic natural sound test administered before, during, and after intervention. Sixty-nine partici-

pants were enrolled, with 58 completing all study phases. Symptom improvement was analysed using mixed-effects models.

Results demonstrated a small but statistically significant reduction in hyperacusis symptoms following the counselling phase and a moderate reduction following sound therapy. In addition, 60% of participants experienced clinically meaningful reductions in hyperacusis symptoms on the IHS. Significant improvements were also observed on the psychoacoustic natural sound test from baseline to study completion. No significant differences in treatment outcomes were identified between the bothersome sounds group and the white noise group.

These findings suggest that HAT-Online may provide significant benefits for individuals with hyperacusis through remote counselling and sound therapy approaches. Both sound therapy strategies appeared similarly effective in reducing symptoms.

Biography

Dr Ann Perreau is Professor of Communication Sciences and Disorders at Augustana College in Rock Island, Illinois, United States. She teaches undergraduate and graduate courses in hearing science and audiology and also provides audiological services focused on tinnitus and hyperacusis at the Roseman Center for Speech, Language, and Hearing.

She currently serves as President-elect of the Illinois Academy of Audiology. Dr Perreau's research focuses on tinnitus and hyperacusis assessment, questionnaire development, and related clinical interventions. She has authored multiple peer-reviewed articles and book chapters in the field.

In 2023, she received funding from the United States National Institutes of Health (NIH) to conduct research on hyperacusis.

SESSION 6

Clinical Interventions for Hyperacusis and Misophonia

Jaelline Jaffe

PO Box 1314, Studio City, CA 91614, United States

Oral Presentation

15 October 2026
12:15 – 12:35



Treatment for Young Children with Misophonia

As misophonia becomes increasingly recognised by the media, parents, doctors, and educators, it is being identified at earlier ages, resulting in more young children being referred for treatment. With growing acknowledgement that misophonia is a genuine condition rather than simply “bad behaviour,” younger generations now have greater opportunities for support than individuals whose symptoms emerged before the condition was formally recognised.

However, treatment options for younger children remain limited. Few mental health professionals provide support for individuals with misophonia, and most primarily work with adults or older adolescents.

One reason for this may be that many therapeutic approaches are based on Cognitive Behavioural Therapy (CBT) or related modalities, which rely on the ability to process abstract concepts and apply them to behavioural change. According to Piagetian developmental theory, the formal operational stage begins around puberty. For children under the age of 12, it may therefore be more difficult to understand or apply neurological and cognitive strategies. Children often perceive the problem as being caused by another person’s sounds and therefore believe the responsibility lies with that individual

rather than recognising their own neurological response to sound triggers.

Children in the preoperational (ages 2–7) and concrete operational (ages 8–11) stages may benefit from occupational therapy or play therapy delivered by practitioners knowledgeable about misophonia. However, these resources are not widely available. This presentation introduces a programme designed to support parents of young children with misophonia in helping their children begin to manage sound reactivity. Activities aimed at promoting productive parent-child engagement will be described, along with sample worksheets for younger children. Therapeutic strategies for clinicians working with parents and children affected by misophonia will also be discussed.



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SESSION 6

Clinical Interventions for Hyperacusis and Misophonia

Charlotte Bigras

School of Speech-Language Pathology and Audiology, Faculty of Medicine, Université de Montréal, Canada

Oral Presentation

15 October 2026
12:35 – 12:55



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Sound Therapy for Hyperacusis Following Mild Traumatic Brain Injury

Hyperacusis is common following mild traumatic brain injury (mTBI) and may contribute to persistent symptoms including irritability, concentration difficulties, dizziness, and tinnitus. Although sound therapy is frequently recommended, evidence regarding its effectiveness in mTBI populations remains limited. This study examined the audiological, physiological, and psychological effects of sound therapy in individuals with mTBI-related hyperacusis.

Thirteen participants with mTBI and hyperacusis used binaural noise generators for at least eight hours per day over a four-week period. Pre- and post-intervention assessments included the Hyperacusis Questionnaire (HQ), uncomfortable loudness levels (ULLs), loudness growth measures, a natural sounds task, and physiological responses including heart rate and electrodermal activity during noise and stress tasks. Semi-structured interviews were also conducted to explore participants' perceived changes following intervention.

Mean HQ scores decreased by four points (range -20 to +3), representing a statistically significant improvement ($p = 0.02$), which was maintained at one-month follow-up ($p = 0.03$). Eleven of the thirteen participants

demonstrated improvement. Mean ULLs increased by 11.3 dB across frequencies from 250 Hz to 8000 Hz, and nine participants demonstrated gains of at least 10 dB in one or both ears.

Qualitative findings indicated a range of perceived benefits, including improved sound tolerance, reduced noise-induced headaches, increased participation in previously avoided activities, decreased reliance on hearing protection, and reduced tinnitus perception. Reported drawbacks included fatigue and irritation associated with prolonged device use. Eleven participants expressed interest in continuing the intervention or purchasing the devices following study completion.

The findings suggest that sound therapy may represent a feasible and potentially beneficial intervention for hyperacusis associated with mild traumatic brain injury, with measurable and subjectively perceived improvements observed after four weeks. The results support further investigation through larger controlled trials and suggest possible clinical utility even in complex post-concussion presentations. Combining subjective, objective, and qualitative measures may help support more individualised management approaches.

Collaborators:

- **Bérangère Villatte**^{1 2 3}
- **Nathalie Boulos**^{1 2 3}
- **Victoria Duda**^{1 3}
- **Sylvie Hébert**^{1 2 3}

Affiliations:

¹School of Speech-Language Pathology and Audiology, Faculty of Medicine, Université de Montréal, Canada

²Interdisciplinary Research Center on the Brain and Learning (CIRCA), Canada

³Interdisciplinary Research Center on Rehabilitation in Metropolitan Montreal (CRIR), Canada

SESSION 7

Differentiating Hyperacusis and Misophonia

Arnaud J. Noreña

Université Aix-Marseille, Centre St Charles,
Faculté des Sciences, Centre de Recherche en
Psychologie et Neurosciences, Marseille, France

Keynote Lecture

15 October 2026
14:15 – 14:40



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

AUDIDIAG: A New Psychoacoustic Tool to Diagnose Hyperacusis and Misophonia

Existing approaches for diagnosing hyperacusis and misophonia, including questionnaires and loudness discomfort levels, present several limitations. These methods may be influenced by response bias, may be unpleasant for patients, and in some cases may even exacerbate symptoms. To address these limitations, a new psychoacoustic assessment tool, AUDIDIAG, was recently developed for the diagnosis of hyperacusis and misophonia.

The development of this tool was guided by several principles, including the requirement that it should be sufficiently rapid for routine clinical use. Unlike traditional psychoacoustic assessments based on artificial sounds such as pure tones, the test uses natural environmental sounds in order to better reflect patients' daily auditory experiences and more ecologically relevant auditory processing. Participants are asked to rate each sound using a pleasant–unpleasant visual analogue scale rather than a loudness scale. This approach aims to capture the broader subjective experience associated with sounds, including emotional reactions, intrusiveness, attentional disruption, and concentration difficulties, rather than focusing solely on perceived intensity.

Individual scores are compared with normative data obtained from control participants without hyperacusis or misophonia. The test ultimately generates a score reflecting deviation from the 75th percentile of a normative population. A subsequent study validated a tablet-based version of the CDS test for the prospective diagnosis of hyperacusis. In addition, test–retest reliability analyses demonstrated that the CDS test exceeded the accepted clinical reliability threshold of 0.70 in both modes, with intraclass correlation coefficients of 0.72 for hyperacusis and 0.82 for misophonia.

The authors hope that widespread use of this assessment tool within audiology may contribute to greater standardisation in the diagnosis of hyperacusis and misophonia.

Biography

Arnaud J. Noreña studies auditory neuroscience and auditory perception in both animals and humans, including individuals with tinnitus, hyperacusis, and misophonia. His research in animal models focuses on mechanisms of auditory perception, tinnitus, hyperacusis, and plasticity within the central auditory system following noise-induced hearing loss. His work uses approaches including cochlear electrophysiology, auditory brainstem responses, compound action potentials, cochlear microphonics, electrophysiological recordings from auditory centres, immunohistochemistry, and behavioural methods.

In human participants, his research focuses on developing psychoacoustic tools to better characterise tinnitus, hyperacusis, and misophonia. More recently, he has explored relationships between the middle ear, tinnitus, hyperacusis, pain, and sensations of ear fullness.

He also has strong interests in psychology and philosophy, particularly phenomenology as developed by Husserl. Within this framework, he seeks to understand tinnitus and misophonia through the subjective “how” of

experience rather than solely the “why.” His work emphasises the importance of examining how experiences appear phenomenologically, recognising that patient narratives may be influenced by social expectations and clinical interactions.

SESSION 7

Differentiating Hyperacusis and Misophonia

Ansar Uddin Ahmmed

Lancashire Teaching Hospitals NHS
Foundation Trust, United Kingdom

Oral Presentation

15 October 2026
14:40 – 15:00



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Profiles Differentiating Hyperacusis and Misophonia in Children with Suspected Auditory Processing Disorder

This study explored whether listening performance is poorer in children with decreased sound tolerance (DST) and examined demographic and neurodevelopmental profiles associated with hyperacusis, misophonia, and the absence of DST.

Retrospective data were collected from 803 children (456 males, 347 females) aged 6–16 years (mean age = 11.9 years, SD = 2.39) with suspected auditory processing disorder (APD) and non-verbal IQ scores ≥ 80 (mean = 98.57, SD = 10.46). Information obtained from structured clinical history forms and transdiagnostic assessments included SCAN-3 tests for listening difficulties (LiD) and validated measures of common neurodevelopmental comorbidities. Participants were divided into three groups: (A) hyperacusis alone (N=429), (B) misophonia with or without hyperacusis (N=241), and (C) no DST (N=133).

Group B included a higher proportion of females and older children compared to Groups A and C ($p < .05$). No significant group differences were observed for non-verbal IQ, SCAN-3 listening difficulty tests, or manual dexterity measures ($p > .05$). Groups

A and B both demonstrated significantly greater inattention and hyperactivity/impulsivity compared to Group C ($p < .05$). Group B also showed significantly poorer general communication composite scores and elevated levels of oppositional defiance, sleep disturbance, and anxiety compared to Groups A and C ($p < .05$). Group A similarly demonstrated poorer communication scores and elevated oppositional defiance, sleep disturbance, and anxiety compared to Group C ($p < .05$).

The findings suggest that listening difficulty performance was not significantly influenced by DST in children with suspected APD. The high prevalence of DST within APD populations suggests that both listening difficulties and DST may represent components of APD. Misophonia, with or without hyperacusis, could be differentiated from hyperacusis alone based on age, gender, communication profile, oppositional defiance, sleep disturbance, and anxiety. The findings further support APD as a marker of broader neurodevelopmental conditions and highlight the importance of transdiagnostic approaches in the evaluation of listening difficulties and decreased sound tolerance.

Biography

Dr Ansar Uddin Ahmmed is a Consultant Paediatric Audiovestibular Physician at Lancashire Teaching Hospitals NHS Foundation Trust, United Kingdom. His work focuses on promoting transdisciplinary approaches to the assessment and management of children with listening difficulties and decreased sound tolerance.

He has published extensively in peer-reviewed journals on auditory processing disorder (APD), particularly regarding the role of comorbidities as reference standards within the Research Domain Criteria framework. His earlier work also highlighted the rationale for amplification approaches in conductive hearing loss associated with persistent otitis media with effusion as an alternative to ventilation tube insertion.

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Hannah Keppler

Department of Rehabilitation Sciences, Ghent University, Ghent, Belgium & Department of Otorhinolaryngology, Head and Neck Surgery, Ghent University Hospital, Ghent, Belgium

Poster Spotlight Presentation

15 October 2026
15:30 – 15:40



Distinguishing Hyperacusis from Tinnitus: Evaluating Sensorineural Encoding and Loudness Growth in Normal-hearing Adults

Hyperacusis and tinnitus frequently co-occur, although their underlying neural mechanisms may differ. While both conditions have been linked to central gain enhancement, theoretical models suggest that tinnitus may arise from near-threshold neural noise, whereas hyperacusis may reflect abnormal gain mechanisms at moderate-to-high sound intensities. Despite these theoretical distinctions, physiological evidence in humans remains limited. This study aimed to characterise sensorineural encoding across multiple participant cohorts to better differentiate hyperacusis from tinnitus.

Young adults with normal audiometric hearing aged 18–35 years were allocated to hyperacusis-only (currently $n=13$), tinnitus-only (currently $n=13$), combined hyperacusis and tinnitus (currently $n=11$), and control groups (currently $n=14$), matched for age and sex. Objective and behavioural measures of sensorineural encoding included extended high-frequency audiometry, distortion product otoacoustic emissions (DPOAE), auditory brainstem responses (ABR), vowel-based frequency following responses (FFR), envelope following responses (EFR), middle ear muscle reflexes (MEMR), and medial

olivocochlear reflexes (MOCR), alongside behavioural vowel discrimination and speech-in-noise tasks.

Data collection is ongoing. Among the 51 participants assessed to date, individuals in the hyperacusis groups demonstrated reduced MEMR amplitudes, while tinnitus groups showed a non-significant trend toward enhanced low-frequency vowel discrimination. Regarding sensorineural encoding, hyperacusis groups demonstrated shorter ABR wave V latencies, and an interaction effect between the presence of hyperacusis and tinnitus emerged for the wave I/V ratio. No significant group differences were identified for DPOAE or EFR measures. Additional data are expected to be available by the time of the conference to allow more conclusive analyses. These preliminary findings suggest that hyperacusis and tinnitus may demonstrate subtly distinct profiles of sensorineural encoding, with efferent auditory pathways potentially playing a role in hyperacusis. Completion of the full dataset will help determine whether these patterns remain consistent.

Funded by RNID Innovation Seed Funding.

Collaborators:

- **Pauline Devolder**, Department of Rehabilitation Sciences, Ghent University, Ghent, Belgium & Department of Otorhinolaryngology, Head and Neck Surgery, Ghent University Hospital, Ghent, Belgium
- **Sarah Verhulst**, Hearing Technology @ iBME, Department of Information Technology, Ghent University, Zwijnaarde, Belgium



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Biography

Pauline Devolder is a final-year PhD student at Ghent University, Belgium, whose work will be presented by Professor Hannah Keppler. Her research focuses on sensorineural auditory encoding in individuals with tinnitus and hyperacusis. She is supervised by Professor Sarah Verhulst and Professor Hannah Keppler. Professor Keppler's research focuses on the prevention and diagnosis of hearing loss, tinnitus, and hyperacusis, as well as rehabilitation of hearing loss through the use of hearing aids.

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Marlon Deutscher

Department of Otolaryngology, Head and Neck Surgery, Hearing, Cognition and Tinnitus, University of Tübingen, Germany

Poster Spotlight Presentation

15 October 2026
15:40 – 15:50



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Audiological and Behavioural Markers for Hyperacusis Possibly Identifiable with OPM-MEG

Hyperacusis co-occurs in more than 55% of individuals with tinnitus, yet it remains largely overlooked in clinical diagnostics and personalised therapeutic approaches. Unlike tinnitus, hyperacusis is characterised by hypersensitivity to sounds across a broad frequency range. In individuals with tinnitus, hyperacusis severity has been associated with longer tinnitus duration, increased psychological stress, and a higher prevalence of pain disorders and dizziness.

This study describes functional differences between healthy controls, individuals with tinnitus with and without hyperacusis, and individuals with hyperacusis alone. Participants completed standardised questionnaires and underwent comprehensive audiological assessment, including pure-tone audiometry with extended high-frequency testing and auditory brainstem responses (ABRs).

ABRs represent a well-established, non-invasive electrophysiological method for assessing neural synchrony and the integrity of auditory pathways. Investigating ABRs in individuals with tinnitus and hyperacusis may therefore provide important insights into both peripheral and central mechanisms of auditory dysfunction and may support

clinical classification. Particular emphasis is placed on differences in suprathreshold ABR responses, which will be related to ongoing studies examining cortical activity in the same participants using optically pumped magnetometer magnetoencephalography (OPM-MEG).

The identification of subclass-specific differences between tinnitus and hyperacusis may support the development of more targeted and causally informed therapeutic approaches and contribute to improved clinical outcomes.

This work was supported by ERA-NET NEURON JTC 2020: BMBF 01EW2102 CoSy-Speech and the Tübingen Research Take Off Program (TRT) of the Brasilien-Lateinamerika Zentrum, University of Tübingen.

Biography

Marlon Deutscher is a medical PhD student in the laboratory of Professor Marlies Knipper and Professor Lukas Rüttiger at the University of Tübingen, Germany, where he has been based since June 2025.

He completed a Master's degree in Dental Medicine (M.H.Sc.) at the University of Vilnius, Lithuania, in June 2025 and is currently pursuing a doctoral degree in dental medicine at the University of Tübingen, Germany.

Collaborators:

- **Rodrigo Donoso-San Martín**^{1,3}
- **Stephan M. Wolpert**¹
- **Stefan Fink**¹
- **Lea Müller**¹
- **Elinor Riegger**¹
- **Christoph Braun**²
- **Paul H. Déllano**³
- **Marlies Knipper**¹
- **Lukas Rüttiger**¹

Affiliations:

¹Department of Otolaryngology, Head and Neck Surgery, Hearing, Cognition and Tinnitus, University of Tübingen, Germany

²MEG Center, University of Tübingen, Germany

³Laboratorio de Neurobiología de la Audición, Departamento de Neurociencia, Facultad de Medicina, Universidad de Chile, Chile

SESSION 8

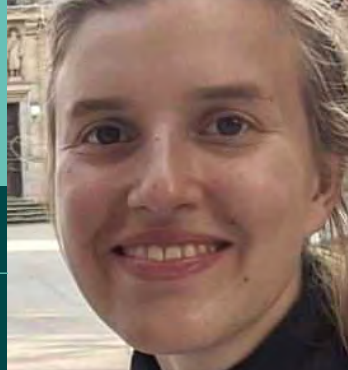
Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Elisabeth Koch

University of Sussex, United Kingdom

Poster Spotlight
Presentation

15 October 2026
15:50 – 16:00



The Neural Bases of Misophonia: A Multimodal Approach to Examine Structural and Functional Brain Abnormalities at Rest and During Trigger Exposure

Tissue-based volumetric analysis shows reduced cerebrospinal fluid volume in misophonia within right auditory and anterior insular regions-of-interest (ROIs). However, the anatomical origin of these differences is unknown. Cortical thickness can localise potential microstructural alterations within these cortices but has not previously been investigated in misophonia.

We analysed T1-weighted structural magnetic resonance imaging (MRI) data from 30 individuals with misophonia and 30 controls. These data were originally collected as part of a magnetic resonance spectroscopy study in which ROIs were the right early auditory cortex and the right anterior insula. Our structural analyses focused on Glasser parcels overlapping with these ROIs, which also included the frontal opercular areas. The frontal operculum 2 (FOP2) near the anterior insula and the retroinsular cortex (RI) within the early auditory cortex were found to be thicker in individuals with misophonia compared to controls.

Increased cortical thickness in the FOP2 and RI may reflect altered development or neural plasticity within networks linking acoustic features to salience and negative emotional

responses in misophonia. Ongoing work aims to replicate previous resting-state, sound-evoked, and structural findings in misophonia using a larger functional MRI sample, and to identify the neural substrates of comorbid misokinesia.

Biography

Elisabeth Koch is currently completing a PhD in Neuroscience at the University of Sussex, United Kingdom, under the supervision of Dr Giulia Poerio and Dr Theodoros Karapanagiotidis. Her research focuses on the neural bases of misophonia and misokinesia, as well as the effects of non-invasive vagus nerve stimulation for misophonia and its comorbidities.

Collaborator:

Carli D. Fine, Clara Wakonigg-Alonso, Sian O. Panton, Louisa J. Rinaldi, Jamie Ward, Theodoros Karapanagiotidis & Giulia L. Poerio

Affiliation:

University of Sussex, United Kingdom Giulia



HASHIR AAZH AND
BRIAN C. J. MOORE

Living Well with

Tinnitus

A self-help guide
using cognitive
behavioural
therapy

an
OVERCOMING
publication

0

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Lige Luo

University of Sussex, Brighton, United Kingdom

Poster Spotlight
Presentation

15 October 2026
16:00 – 16:10



Collaborators:

- **Jamie Ward**, University of Sussex, Brighton, United Kingdom
- **Sophie Forster**, University of Sussex, Brighton, United Kingdom



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Attention and Visual Distraction in Misophonia

For individuals with misophonia, trigger stimuli may be especially difficult to ignore. It is also possible that people with misophonia demonstrate broader trait-like attentional differences, including increased distractibility. These competing explanations generate different predictions regarding the types of stimuli that may interfere with attention in misophonia, ranging from selective vulnerability to trigger-related stimuli to broader attentional disruption across multiple stimulus types. A recent study identified evidence consistent with a dual deficit for auditory distractors, whereby individuals with misophonia showed impaired performance on a visual classification task in the presence of irrelevant sounds, particularly trigger sounds.

The present study extended this work by examining the effects of visual distractors. Silent videos categorised as neutral, unpleasant, or misophonic were presented in the visual periphery while participants completed a central visual serial attention task.

Forty-seven individuals with misophonia and 47 control participants completed the task. Reaction time and accuracy were measured, and distractor cost indices were calculated relative to no-distractor conditions. Age and self-report measures related to comorbid

symptoms were included as covariates. Exploratory lag analyses were conducted to examine the temporal dynamics of distraction effects.

Silent videos slowed responses relative to no-distractor trials, although accuracy was unaffected. Initial analyses demonstrated a significant group effect, with individuals with misophonia showing larger reaction-time distractor costs than controls across all three distractor conditions. Exploratory lag analyses further suggested that distraction effects in the misophonia group were strongest immediately following distractor onset and diminished across subsequent trials. However, these effects were no longer statistically significant after controlling for covariates.

The findings suggest that silent visual distractors may disrupt visual task performance in individuals with misophonia, primarily through transient slowing of responses following distractor onset. However, the study did not identify strong evidence for selective vulnerability specifically to misophonic visual stimuli.

Biography

Lige Luo is currently completing a PhD in Psychology at the University of Sussex, United Kingdom, under the supervision of Professor Jamie Ward, Dr Sophie Forster, and Professor Julia Simner. Her research focuses on attention in misophonia and its underlying neural mechanisms.

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Haruka Ito

University of Tsukuba, Japan

Poster Spotlight
Presentation

15 October 2026
16:10 – 16:20



Collaborators:
see below



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Hyperacusis and Related Sensory Traits in the Auditory Section of the Sensory Experiences Questionnaire 3.0: A Secondary Data Analysis from the Japanese Version Validity Study

The Sensory Experience Questionnaire (SEQ) 3.0 is a caregiver-report questionnaire designed to assess sensory features in children with autism spectrum disorder (ASD). Its auditory section includes items mapped across four domains: hyperresponsiveness (HYPER), hyporesponsiveness (HYPO), sensory interests, repetition and seeking behaviour (SIRS), and enhanced perception (EP). Within the auditory section, HYPER reflects behaviours related to hyperacusis. This study examined the factor structure of the auditory section and explored relationships between hyperacusis-related behaviour and other sensory traits.

Publicly available data from 154 children with ASD and 156 typically developing children were analysed. Confirmatory factor analysis and exploratory factor analysis were conducted focusing on the auditory section. Group differences in scores were examined using t-tests. Relationships between HYPER and the other three domains were explored using Pearson's correlations and multiple regression analyses, while group differences in correlation coefficients were tested using Fisher's r-to-z transformation.

The confirmatory factor analysis supported the four-factor structure, whereas the one-factor model demonstrated poor fit. Exploratory factor analysis supported a three-factor structure broadly corresponding to HYPER, EP, and HYPO, although some items did not align perfectly. Children with ASD demonstrated significantly higher total scores and higher HYPER scores compared to typically developing children. HYPER showed moderate correlations with HYPO, SIRS, and EP. The ASD group demonstrated lower correlations between HYPER and HYPO compared to controls. Multiple regression analysis showed that HYPO, SIRS, and EP significantly predicted HYPER scores across both groups.

The findings suggest that auditory symptoms are multidimensional rather than unidimensional and support the multidomain structure of the auditory section of the SEQ. The pattern of symptom combinations may also differ according to the presence of ASD.

Biography

Haruka Ito specialises in disability studies, with a particular focus on the psychology of autism spectrum disorder. Her primary research interest is decreased sound tolerance, and she is currently completing doctoral research focused on misophonia.

Collaborators:

- Takeshi Atsumi²
- Masakazu Ide³
- Kanae Matsushima⁴
- Shinji Okazaki⁵
- Atsuko Sato¹

Affiliations:

- ¹University of Tsukuba, Japan
- ²Kyorin University, Japan
- ³Research Institute of National Rehabilitation Center for Persons with Disabilities, Japan
- ⁴Kansai Medical University, Japan
- ⁵Waseda University, Japan

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Giovani de Oliveira

Recife, Brazil

Poster Spotlight
Presentation

15 October 2026
16:20 – 16:30



Collaborators:

▪ **Dr. Antônio Gabriel Medeiros**, Universidade Católica de Pernambuco – UNICAP, Brazil.



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Hyperacusis in Chronic Tinnitus: An Integrative Review of Auditory Gain, Salience Processing and Psychological Mechanisms

Hyperacusis is frequently reported in individuals with chronic tinnitus, suggesting a partial overlap between the mechanisms underlying tinnitus perception and sound intolerance. Although alterations in auditory processing, including increased central auditory gain, have been proposed as contributors to hyperacusis, evidence suggests that emotional and cognitive processes also influence the perception and persistence of sound-related distress. Heightened auditory vigilance and increased salience attribution to auditory stimuli may amplify sound intolerance in susceptible individuals.

This presentation reviews the literature on hyperacusis in patients with chronic tinnitus and integrates current findings into a conceptual framework linking auditory processing alterations, salience network activation, and psychological mechanisms. A narrative review was conducted using PubMed, Scopus, and Google Scholar. Peer-reviewed articles addressing hyperacusis in tinnitus populations, auditory gain models, salience networks, and psychological correlates of sound intolerance were examined. Forty-two articles were included in the qualitative synthesis.

The literature suggests that hyperacusis in individuals with tinnitus may arise from interacting mechanisms. Neurophysiological models describe increased central auditory gain and altered auditory-limbic connectivity, which may enhance the perceived intensity of sounds. Psychological factors such as anxiety, attentional bias toward sound, and auditory hypervigilance also influence how sounds are interpreted.

Hyperacusis in chronic tinnitus appears to involve interactions among auditory, emotional, and cognitive systems. Integrating these mechanisms within a framework of auditory gain, salience processing, and psychological modulation may support a broader understanding of sound intolerance and encourage combined audiological and psychological approaches in clinical assessment.

Biography

Giovani de Oliveira is a PhD student in Clinical Psychology at the Universidade Católica de Pernambuco (UNICAP-PE), Brazil. He holds a Master's degree in Biosciences and Health from Universidade Tiradentes (UNIT-SE), Brazil, and is a licensed clinical psychologist (CRP 02/30023).

He earned degrees in Psychology from the Faculdade de Ciências Humanas de Pernambuco (ESUDA-PE), Brazil, and in Social Communication from UNICAP-PE. He also completed postgraduate training in Cognitive Behavioral Therapy and Neuroscience at UNINTER-PR.

His research focuses on integrating Mindfulness and Cognitive Behavioral Therapy (CBT) to reduce auditory and emotional symptoms in individuals with chronic tinnitus. Clinically, he works with tinnitus, misophonia, hyperacusis, and phonophobia, applying the Mindfulness-Based Tinnitus Stress Reduction (MBTSR) protocol.

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Yumi Yamazawa
Chuo University, Japan

Poster Spotlight
Presentation

15 October 2026
16:30 – 16:40



Collaborators:

▪ Akira Midorikawa, Chuo University, Japan



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Cultural Specificity of Misophonia in the Japanese Population: Evidence from an Auditory-Based Experimental Approach

Misophonia is characterised by strong negative emotional reactions to specific sounds. Previous research has identified cultural differences in trigger sounds, with Japanese individuals demonstrating patterns distinct from those observed in Western countries and China. However, earlier findings were primarily based on self-report questionnaires, making it unclear whether these differences would also emerge in response to actual auditory stimuli.

A psychoacoustic test using environmental sounds to assess misophonia has recently been developed and validated in Western samples. If cultural differences in misophonia reflect perceptual or physiological responses rather than only cognitive interpretations, such differences should also emerge during exposure to real sounds. This study therefore examined cultural differences in unpleasant sound perception by applying these auditory stimuli within a Japanese sample.

Forty-two university students (mean age = 21.55 years, SD = 1.58) participated in the study. Participants rated 29 environmental sounds categorised as misophonic, unpleasant, or pleasant using a visual analogue

scale ranging from 0 (very pleasant) to 100 (very unpleasant). Each sound was presented once at 60, 70, and 80 dB.

Using comparison data provided by Enzler and colleagues (2021), Mann–Whitney U tests were conducted to compare median unpleasantness ratings between participants in the present study and participants from previous Western samples.

Japanese participants reported significantly greater unpleasantness for sounds including “fountain,” “vomit,” “female screams,” “laugh,” and “gargling” ($p < .03$, $r = .12$ – $.21$). In contrast, Western participants reported greater unpleasantness for sounds such as “knife hitting glass,” “pen clicking,” “keyboard,” “sniffing,” “wheezing,” and “chewing” ($p < .05$, $r = -.23$ to $-.11$).

The findings indicate cultural differences in unpleasant sound perception that are observable not only in self-report measures but also during exposure to actual auditory stimuli, suggesting that cultural variation may extend to perceptual and physiological levels.

Biography

Yumi Yamazawa is a PhD student in Psychology specialising in auditory perception and individual differences. Their research focuses on sound sensitivity, particularly misophonia and hyperacusis, and its associations with autistic traits. They have conducted large-scale studies within general population samples examining how individual differences shape emotional and behavioural responses to everyday sounds.

A central aspect of their work involves investigating cultural differences in misophonia-related trigger sounds, with particular focus on patterns observed in Japanese populations compared with Western and other cultural contexts. Their recent research also explores auditory hypersensitivity in older adults and its psychological and social implications.

SESSION 8

Poster Spotlight Session – Emerging Perspectives on Hyperacusis and Misophonia

Mathilde Bauer

School of Health and Society, University of Salford, United Kingdom

Poster Spotlight
Presentation

15 October 2026
16:40 – 16:50



Collaborators:

- **Robert Bendall**, School of Health and Society, University of Salford, United Kingdom
- **Duncan Williams**, School of Science, Engineering and Environment, University of Salford, United Kingdom



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Psychometric Properties and Sound-Response Profiles of Decreased Sound Tolerance Conditions

Decreased Sound Tolerance conditions include misophonia and hyperacusis. Emerging research suggests that some individuals may experience hyperacusis and misophonia concurrently. However, previous studies on misophonia have often excluded hyperacusis due to uncertainty regarding the overlap between these conditions. Measures of decreased sound tolerance have been shown to correlate, suggesting potential commonalities between these constructs.

This has limited researchers' ability to confidently assess hyperacusis and misophonia simultaneously while also distinguishing them as separate conditions.

This study replicates previous research on misophonia psychometrics and sound-response profiles while extending these methods to hyperacusis samples. The research will be pre-registered. Group membership, including individuals with hyperacusis, individuals with misophonia, control participants, and individuals reporting both conditions simultaneously, will be determined using self-report measures and clinical diagnosis of hyperacusis.

Correlations among commonly used psychometric measures, including the Sussex Misophonia Scale and the Hyperacusis Questionnaire, will be examined. A sound-response profile will also be extracted to assess the specificity of sounds and responses in decreased sound tolerance conditions, using machine learning classifiers to identify sound-response patterns predictive of group membership.

It is expected that misophonia will be associated with characteristic reactions exacerbated by specific sounds, whereas hyperacusis may relate more strongly to specific perceptual descriptors across sounds. In addition, acoustic feature extraction analyses extending beyond previously proposed markers of unpleasantness are hypothesised to support the idea that hyperacusis is more acoustically driven than misophonia. Misophonia, in contrast, may relate more strongly to semantic and affective properties of sounds, supporting previous theoretical consensus.

This research aims to clarify the experience of decreased sound tolerance and improve the diagnostic utility of self-report measu-

res, ultimately supporting more confident simultaneous assessment of hyperacusis and misophonia.

Biography

Mathilde Bauer's PhD research focuses on affective profiles of decreased sound tolerance, particularly misophonia and hyperacusis. She is interested in how sound influences emotions and wellbeing and hopes her research will contribute to the development of coping strategies and therapeutic approaches for individuals with decreased sound tolerance conditions.

She holds a Bachelor's degree in Psychology with a minor in Music Studies from the University of Sussex and a Master's degree in Cognitive Neuroscience from University College London (UCL). She also completed a placement year at the University of Sussex, where she worked as a research assistant investigating perceptual differences, including synaesthesia and misophonia, at both behavioural and neural levels using MRI methods.

Her Master's dissertation examined sound pleasantness and visual imagery. Alongside her academic interests, she has a longstanding passion for music, including playing the flute and performing in musical and charity events.

SESSION 9

Pain Hyperacusis: Mechanisms and Clinical Perspectives

Kelly Jahn

The University of Texas at Dallas,
United States

Oral Presentation

16 October 2026
09:30 – 09:50



Collaborators:

- **Loel Izzard**, The University of Texas at Dallas, United States
- **Hannah Keppler**, Ghent University, Belgium



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

Characterizing Symptom Fluctuations and Setbacks in Pain Hyperacusis Over Time: Preliminary Results Using Ecological Momentary Assessment

Pain hyperacusis is a condition in which everyday sounds are perceived as physically painful and can severely affect quality of life. Symptoms often fluctuate over time and in response to sound exposure, with individuals reporting changes in pain severity, location, quality, and periods of symptom exacerbation commonly referred to as setbacks. Despite the clinical importance of these fluctuations, current understanding relies largely on questionnaires and qualitative reports that may be limited by retrospective bias.

The objective of this study is to quantify real-time variation in hyperacusis symptoms and related health factors using an ecological momentary assessment (EMA) approach. Twenty adults with pain hyperacusis of at least three months' duration will complete a two-week EMA protocol designed to capture symptom fluctuations with minimal recall bias. Participants will use the MyCap application to complete brief surveys within their everyday environments.

Three scheduled survey invitations will be delivered daily, with participants also able to initiate additional surveys following sound exposure or symptom exacerbation. Surveys

will assess recent sound-related discomfort or pain, symptom characteristics, pain relief, and possible mediating factors including sound exposure, medication use, diet, mood, emotional state, and sleep.

Participants will be recruited and assessed between April 2026 and August 2026, allowing preliminary findings to be presented at the 8th International Conference on Hyperacusis and Misophonia.

The findings are expected to provide a more detailed understanding of setbacks in pain hyperacusis, including their defining characteristics, potential triggers, and factors that may distinguish temporary from persistent worsening. The study will also characterise day-to-day symptom variability, identify protective and exacerbating factors for sound-induced pain, and examine how associated symptoms such as tinnitus co-vary with pain. Together, these findings may help refine the phenotype of pain hyperacusis, improve understanding of relationships among symptoms and lifestyle factors, and support more informed clinical care.

Biography

Kelly Jahn, AuD, PhD, is Assistant Professor of Speech, Language, and Hearing at The University of Texas at Dallas, United States. Her research focuses on understanding how auditory perception and emotional sound processing change across the lifespan and as a consequence of hearing loss.

She is particularly interested in improving outcomes for individuals who use cochlear implants and for people experiencing hyperacusis.

SESSION 9

Pain Hyperacusis: Mechanisms and Clinical Perspectives

Arnaud J. Noreña

Aix-Marseille University, France

Oral Presentation

16 October 2026
09:50 – 10:10



The Contribution of the Middle Ear and Trigeminal Nerve to Specific Sub-types of Tinnitus and Hyperacusis: An Update

Some individuals with tinnitus and hyperacusis report a cluster of associated symptoms including ear fullness, otic pain, facial pain, and neck pain. It has been proposed that these symptoms may arise, at least in part, from dysfunction involving the middle ear, including the middle ear muscles, together with involvement of the trigeminal nerve.

This study investigated a new cohort of patients ($n = 14$) using a range of approaches including psychoacoustic assessment, tympanometry, and ear canal pressure measurements reflecting tympanic membrane movements.

Overall, the findings support the involvement of the trigeminal nerve and suggest dysfunction of the tensor tympani muscle in specific subtypes of tinnitus and hyperacusis. The results further contribute to growing evidence implicating middle-ear and trigeminal mechanisms in sound intolerance and related otological symptoms.

Collaborators:

- **Claudia Côté**, Aix-Marseille University, France
- **Philippe Fournier**, Aix-Marseille University, France

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SESSION 9

Pain Hyperacusis: Mechanisms and Clinical Perspectives

Mahdi Azizi

Institute for Cell Biology and Neuroscience,
Goethe University Frankfurt, Frankfurt am
Main, Germany and Hashir International
Institute, London, United Kingdom

Oral Presentation

16 October 2026
10:10 – 10:30



Collaborators:

▪ **Hashir Aazh**, Hashir International Institute, London,
United Kingdom



INTERNATIONAL CONFERENCE ON
HYPERACUSIS AND MISOPHONIA

The Relationship Between the Self-reported Frequency of Sound-induced Aural Pain, as an Indicator of Pain Hyperacusis, and Uncomfortable Loudness Levels

Pain hyperacusis is characterised by aural pain, such as stabbing, burning, or aching sensations, in response to everyday sounds. Uncomfortable loudness levels (ULLs) are commonly used to assess hyperacusis. ULLmin is defined as the average ULL across frequencies from 0.25 to 8 kHz for the ear with the lower mean threshold and has shown consistency in identifying hyperacusis. However, ULLs primarily reflect loudness tolerance and may not adequately capture the pain dimension of sound intolerance. Evidence linking pain hyperacusis to ULLmin remains limited.

The Sound Sensitivity Symptoms Questionnaire (SSSQ2) includes an item assessing the frequency of pain in response to sound over the previous two weeks. This study examined the relationship between this item and ULLmin.

Questionnaire and audiological data were collected during initial clinical visits from 295 patients. ULLs were measured using a modified clinical protocol with a maximum presentation level of 80 dB HL, with responses recorded as 85 dB HL if no discomfort was

reported. Associations between the SSSQ2 pain item, ULLmin, audiometric thresholds, and questionnaire measures including the Hyperacusis Impact Questionnaire (HIQ), Tinnitus Impact Questionnaire (TIQ), and Screening for Anxiety and Depression in Tinnitus (SAD-T) were analysed using Spearman correlations, age-adjusted partial correlations, regression analyses, and Kruskal–Wallis tests.

Patients reporting more frequent pain hyperacusis symptoms demonstrated significantly lower ULLmin values ($p = 0.0019$). Symptom frequency was negatively correlated with ULLmin ($r = -0.235$, $p = 0.0007$), and this relationship remained significant after adjusting for age. No association was identified between pain symptom frequency and audiometric hearing thresholds. Higher symptom frequency was strongly associated with greater hyperacusis impact ($r = 0.589$, $p < 0.001$), increased tinnitus impact, and elevated anxiety and depression scores (all $p < 0.001$). However, the expected gradient across higher symptom frequency categories was inconsistent, particularly between the 7–10 day and 11–14 day groups.

The findings suggest that pain hyperacusis symptom frequency is associated with reduced ULLmin and increased psychological distress. However, inconsistencies across severity categories indicate limitations in both ULLmin and the SSSQ2 pain item for capturing pain-related sound intolerance. Avoidance behaviours may also influence reported symptom frequency. More nuanced assessment approaches may therefore be required.

Biography

Mahdi Azizi is a Master's student in Interdisciplinary Neuroscience at Goethe University Frankfurt, Germany. He is also a Research Assistant in Audiology and Neuroscience at the Hashir International Institute, United Kingdom.

His research focuses on cognitive and behavioural neuroscience, audiology, speech perception, and auditory processing. He has contributed to hyperacusis research, including the translation and validation of assessment tools such as the Hyperacusis Impact Questionnaire for Persian-speaking populations, and also has experience as a clinical audiologist.

SESSION 9

Pain Hyperacusis: Mechanisms and Clinical Perspectives

Myriam Westcott

University of Melbourne, Australia

Oral Presentation

16 October 2026

10:30 – 10:50



Sound-induced Pain in Hyperacusis Patients from a Multidisciplinary Clinical Perspective: The Role of Tensor Tympani Syndrome (TTS)

Symptoms consistent with Tensor Tympani Syndrome (TTS) may include stabbing aural pain, dull otalgia, tinnitus, aural fullness, pain, numbness or burning sensations around the ear, muffled hearing, tympanic flutter, and mild vertigo.

This full or partial symptom cluster has been associated with acoustic shock and has been identified as highly prevalent in many patients with hyperacusis and tinnitus. These symptoms are also frequently reported as being sound induced.

Clinical evaluation and treatment of TTS symptoms within a multidisciplinary setting over a period of 30 years involving patients with hyperacusis, acoustic shock, and tinnitus has provided important insights into potential triggers of TTS and, more broadly, into mechanisms underlying hyperacusis.

This presentation will discuss the clinical presentation of TTS, approaches to evaluation, and therapeutic strategies used within multidisciplinary care. Particular emphasis will be placed on the importance of recognising and addressing TTS symptoms in patients with hyperacusis, as well as the therapeutic

value of helping patients understand and demystify the underlying physiological pathways involved.



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SESSION 9

Pain Hyperacusis: Mechanisms and Clinical Perspectives

Michael Boedts

De Luisterkliniek, AZ Maria Middelaes,
Ghent, Belgium

Oral Presentation

16 October 2026
10:50 – 11:10



Collaborators:

▪ A. Taevernier, De Luisterkliniek, AZ Maria Middelaes,
Ghent, Belgium



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HYPERACUSIS AND MISOPHONIA

Endoscopic Tensor Veli Palatini Botulinum Toxin Combined with Clomipramine for Treatment-refractory Pain Hyperacusis: A Seven-patient Case Series

Pain hyperacusis, also referred to as no-xacusis, is among the most disabling and least studied subtypes of hyperacusis. It is characterised by sound-evoked otic pain that is disproportionate to stimulus intensity and may persist following sound cessation. Currently, no randomised controlled trials evaluating clinical management approaches for pain hyperacusis exist. Recent patient-reported data have highlighted severe disability, frequent symptom setbacks, neuropathic pain characteristics, and limited benefit from existing interventions.

Within a trigeminocervical control model, the tensor tympani (TT) and tensor veli palatini (TVP) muscles are proposed to function as a coordinated peripheral unit within a sensitised trigeminocervical system. Two interacting mechanisms are hypothesised: (i) peripheral or central sensitisation associated with increased central gain, and (ii) behavioural drive toward TT/TVP contraction, often linked to hypervigilance and obsessive-compulsive or controlling traits.

Building upon earlier endoscopic observations, this study explored a multimodal inter-

vention combining endoscopically guided botulinum toxin injections targeting the TVP with clomipramine treatment, aiming to address both peripheral motor activity and central sensitisation mechanisms.

This retrospective case series included seven consecutive patients (1 female, 6 male; age range 20–50 years) with severe treatment-refractory pain hyperacusis presenting between 2022 and 2025. All patients had previously failed multiple interventions including pharmacotherapy, tympanic membrane patching, neuromodulation, nerve blocks, and specialist psychological treatment.

Botulinum toxin type A was administered under rigid endonasal endoscopic guidance into the TVP muscle (10–30 units per side). Additional trigeminocervical muscles were injected on a “follow the pain” basis in selected cases. Clomipramine, or alternative medication when not tolerated, was titrated to doses between 100 and 225 mg/day. Outcomes included patient-reported changes in sound-evoked pain, sound tolerance, and functional ability.

Five of the seven patients reported clinically meaningful subjective improvements in pain severity and daily functioning, including recovery of speech following a year of mutism and the ability to attend cinemas or family gatherings without hearing protection. Two patients reported no clear benefit. The duration of benefit from each botulinum toxin treatment cycle ranged from approximately 6 to 12 weeks. Side effects, including dysphagia, nasal regurgitation, and mild dysarthria, were mild and transient. Because botulinum toxin and clomipramine were introduced concurrently, the individual contribution of each intervention could not be determined.

The findings suggest that TVP-targeted botulinum toxin combined with clomipramine warrants further prospective controlled investigation in severe pain hyperacusis, a highly disabling and under-researched condition for which evidence-based treatments remain lacking. Placebo-controlled trials using validated outcome measures are urgently needed.

Biography

Michael Boedts, originally trained as an otologist, became interested early in his career in the peripheral mechanisms underlying tinnitus and hyperacusis while working in a secondary referral centre. Later, during his work at the Brai3n neuromodulation centre, he expanded this perspective through investigation of central neural network mechanisms.

By integrating peripheral and central perspectives, he developed the “Tympanic Resonance Hypothesis,” describing a peripheral listening system centred on the tensor tympani (TT) and tensor veli palatini (TVP). Drawing upon earlier work by Klockhoff and Westcott, this model proposes that dysfunction within the TT/TVP axis may contribute to dull hearing, hyperacusis, tinnitus, and associated trigeminocervical symptom clusters.

In 2023, he founded De Luisterkliniek (“The Listening Clinic”), which focuses on subgrouping and phenotyping approaches to develop personalised interventions, with current research aimed at identifying patients most likely to benefit from targeted botulinum toxin treatment.

SESSION 10

Clinical, Psychometric, and Psychosocial Profiles in Hyperacusis and Misophonia

Sabarinath Vijayakumar

Royal Derby Hospitals, United Kingdom

Oral Presentation

16 October 2026

11:35 – 11:55



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A Retrospective Study of Emotional and Audiological Characteristics of Hyperacusis Versus Misophonia in Children with Auditory Processing Disorder (APD)

This retrospective study explored the prevalence, emotional characteristics, and audiological features of hyperacusis and misophonia in children diagnosed with auditory processing disorder (APD). The study also examined differences in stapedial reflexes and loudness discomfort levels between children with hyperacusis and those with misophonia.

The study was registered with the Trust Clinical Audit Department. Retrospective data were collected from 279 children diagnosed with APD between January 2021 and December 2022. The sample included 160 males and 119 females aged between 6 and 16 years (mean age = 11.69 years, SD = 2.2) with non-verbal IQ scores ranging from 80 to 128.

The department employed a protocol involving preconditioning of children using principles consistent with positive affect labelling and psychoeducation derived from Cognitive Behavioural Therapy prior to measuring stapedial reflexes and loudness discomfort levels. Automated stapedial reflex measurements began at 60 dB and increased in 5 dB steps until a 0.02 ml decrease in compliance

was obtained.

Among the 279 children with APD, 143 demonstrated decreased sound tolerance (DST). Of these, 107 had hyperacusis without misophonia and 36 had misophonia. Misophonia co-occurred with hyperacusis in 35 children (97%), while only one child presented with misophonia without hyperacusis. Misophonia was more prevalent in older children, females, and those with tinnitus.

For analysis, participants were divided into three groups: children with no DST (Group A), children with hyperacusis only (Group B), and children with misophonia with or without hyperacusis (Group C). Fear and distress were the predominant emotional responses in Group B, whereas disgust and verbal aggression were more common in Group C.

Almost all children with hyperacusis, with or without misophonia, cooperated with stapedial reflex and loudness discomfort testing without signs of distress. Significantly more children demonstrated loudness discomfort levels ≤ 90 dB for 4 kHz tones in both ears compared with Group A. No statistically

significant differences were identified in stapedial reflexes between groups.

The findings indicate that hyperacusis, with or without misophonia, was present in 53.7% of children with APD and commonly co-occurred with other neurodevelopmental conditions. Differences in age, gender, and emotional responses between hyperacusis and misophonia may contribute to improved understanding and future definition of misophonia. The findings also suggest that loudness discomfort levels and stapedial reflexes can be successfully measured in children with hyperacusis when appropriate preconditioning approaches are used, potentially supporting clinical management and counselling.

Biography

Sabarinath Vijayakumar is an Audio-vestibular Medicine trainee doctor (ST5) with a strong interest in hearing and balance disorders, particularly in children and young people. His clinical work involves the management of a wide range of audiological and vestibular conditions.

He has published research on hyperacusis and misophonia, focusing on their clinical presentation, diagnostic challenges, and impact on patients' daily lives. Through this work, he aims to improve awareness and understanding of these conditions within clinical practice.

Alongside research, he is actively involved in teaching and professional development and has delivered educational sessions and attended national courses in paediatric vestibular medicine. His work reflects an ongoing commitment to evidence-based clinical practice, academic contribution, and patient-centred care.

SESSION 10

Clinical, Psychometric, and Psychosocial Profiles in Hyperacusis and Misophonia

Karin Zimmer

AE Empirische Bildungsforschung,
Universität Vechta, Germany

Oral Presentation

16 October 2026
11:55 – 12:15



Collaborators:

- **Wolfgang Ellermeier**, Technische Universität Darmstadt, Germany
- **Eunsung Song**, ENTPE, Vaulx-en-Velin, France
- **Catherine Marquis-Favre**, ENTPE, Vaulx-en-Velin, France
- **Sang Hee Park**, KICT, Gyeonggi-do, Republic of Korea



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Cross-language Validation of the HIQ and SSSQ Hyperacusis Questionnaires in French, German, and Korean Non-clinical Adult Samples

The comparability of questionnaire data across different samples and languages is an important aspect of psychometric quality. This study reports the cross-language validation of the Hyperacusis Impact Questionnaire (HIQ) and the Sound Sensitivity Symptoms Questionnaire (SSSQ), originally developed in English by Aazh and colleagues (2022).

As part of a broader project investigating general noise sensitivity, the HIQ and SSSQ were translated into French, German, and Korean and administered to non-clinical stratified adult samples ranging from 213 to 301 participants fluent in the respective language. Data obtained using the translated versions were compared with data from the original English-language versions collected from non-clinical adult samples in the United Kingdom and the United States that were broadly representative in terms of age, sex, and ethnicity. All participants were recruited through an online platform and received compensation for participation.

The results demonstrated that the factor structures of both the HIQ and SSSQ were unidimensional across all language samples

and that internal consistency measures were comparable between groups. Cronbach's alpha values ranged from 0.90 to 0.93 for the 8-item HIQ and from 0.79 to 0.89 for the 5-item SSSQ. These findings are similar to those reported during the original development of the instruments using a United Kingdom patient sample.

Further analyses examining configural, metric, and scalar invariance across language versions are currently ongoing and will be presented at the conference.

Research funded by Fondation pour l'Audition (FPA), grant number FPA RD-2022-6.

Biography

Karin Zimmer is Professor of Empirical Educational Research at the Faculty of Education and Social Sciences, Universität Vechta, Germany. Her current research focuses on noise sensitivity, participatory research approaches, and systematic review methodologies within educational and public health research contexts.

SESSION 10

Clinical, Psychometric, and Psychosocial Profiles in Hyperacusis and Misophonia

Simran Deep Singh

School of Psychology, University of
Sussex, United Kingdom

Oral Presentation

16 October 2026
12:15 – 12:35



Collaborators:

- **Louisa J. Rinaldi**, School of Psychology, University of Sussex, United Kingdom
- **Miriam Zemel**, School of Psychology, University of Sussex, United Kingdom
- **Julia Simner**, School of Psychology, University of Sussex, United Kingdom



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Loneliness, Social Relations, and Attachment Styles in Misophonia

Misophonia is a sound sensitivity condition characterised by intense intolerance toward specific sounds, such as chewing, which may evoke emotions including anxiety and anger. Recent research has highlighted the role of socio-emotional factors in shaping and maintaining misophonic reactivity. This study examined associations between misophonia, loneliness, attachment styles, relationship adjustment, and coping skills.

The study compared 204 adults, including 102 individuals with misophonia and 102 control participants, using the UCLA Loneliness Scale, State Adult Attachment Measure, Experiences in Close Relationships-Revised, Dyadic Adjustment Scale, and Dyadic Coping Inventory, while controlling for factors such as age and gender.

The findings demonstrated that individuals with misophonia reported greater loneliness and higher levels of anxiety and avoidance within romantic relationships compared to controls. They also reported lower levels of relationship satisfaction and agreement within partnerships. In other words, individuals with misophonia appeared more likely to experience feelings of worry and isolation despite being involved in intimate relationships.

Despite these vulnerabilities, participants with misophonia did not differ from controls in measures of romantic attachment security, closeness, affection, or coping. These findings suggest that the desire for intimacy, emotional connection, and commitment to relationships remains intact in individuals with misophonia.

The results indicate that treatment approaches for misophonia may benefit from incorporating relationship-focused and interpersonal components. Overall, the study suggests that misophonia involves broader personal and relational processes extending beyond responses to sound alone.

Biography

Simran Deep Singh, M.S., is a second-year PhD student at the University of Sussex, United Kingdom, originally from India. Her research focuses on conceptualising misophonia within a relational framework by exploring the intersection between sensory sensitivity and interpersonal relationships.

Before beginning her doctoral studies in 2024, she worked as a school therapist in India, providing both short-term and long-term therapeutic support to children. Her work is informed by the perspective that individuals and their lived experiences are shaped by relational histories involving the self, others, and the broader social world. This perspective underpins her interest in how misophonia is experienced and understood within close relationships.

NOTES



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