

IN CONVERSATION WITH

David Baguley

A reflective discussion with a scientist-practitioner in tinnitus

David Baguley has worked in audiology at Addenbrooke's Hospital since 1985, becoming the Consultant Clinical Scientist in 1989. In 2006, David received an International Award in Hearing from the American Academy of Audiology. He is a visiting professor at Anglia Ruskin University and has just been appointed as President of the British Tinnitus Association. He will be a keynote speaker at the 1st EU COST Action (TINNET) and represents the UK on the TINNET Management Committee. **Deborah Hall** has a background in psychology and has worked in the hearing sciences since 1999. Deborah was awarded the British Society of Audiology Thomas Simm Littler prize in 2010 for her services to audiology. She represents the UK on the TINNET Management Committee and is chair of WG5. In this interview Deborah and David talk about combining research and clinical practice, contemporary issues in tinnitus and the importance of the TINNET COST Action BM1306.



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You've successfully managed to juggle a busy clinical career with academic research. What would be your advice to other health-care professionals interested in getting involved in research? This can sometimes be quite tricky.

Whilst my research really enriches my clinical career, from a personal perspective it can certainly be a challenge to weave the two together. I have been and remain very busy clinically, with local managerial and national leadership roles, as well as producing academic outputs. My advice to those starting on a similar path is to see how these various functions actually support and inspire each other. For those just starting out, I think my advice would be to get some training in literacy in statistics, experimental design and to take advice from experienced colleagues before you embark on a piece of research that might just end up being a fruitless task.

Do you have any observations from your own career as to how you've actually gone about combining clinical and academic work?

Well, trial and error and many mistakes, but many successes also. I think collaborating with large numbers of people internationally from different disciplines provides an excellent context for combining clinical and academic work.

What aspect of your work personally gives you the greatest pride?

In terms of published work, the new book I have edited with Marc Fagelson (Tinnitus: Clinical and Research Perspectives, Plural, 2016) has been a joy. I still enjoy seeing new patients and interacting with them. As we speak, I recall a patient seen in the clinic this afternoon: 15 years old, and devastated with tinnitus from her first rock concert. Her mother (a medic) consumed with guilt, and her seven-year-old sister concerned for her family. An hour later and the tears are now of relief. Many challenges and much work remains for them, but the plan is clear.

In your new book, you've written a chapter on 'Tinnitus and Hyperacusis in Literature, Film, and Music'. How did the idea for this come about?

Clearly I'm fascinated by tinnitus, and over the years noticed several mentions in the arts. I also observed that neurologists and psychiatrists often reflect upon depictions of illnesses in their domains in literature, and I thought it would be interesting to undertake that for tinnitus and hyperacusis.

In the chapter, you introduce the idea of portrayals of tinnitus and hyperacusis in the arts as a way of experiencing these conditions from a different perspective. How did researching the chapter enrich your view?

The portrayals that I describe are very varied. There are some that illustrate

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the anguish some people with tinnitus experience, but there are others indicating that tinnitus can be a stimulus for emotional and personal growth. Some characters are resilient, and others fragile. For me this has deepened my view of tinnitus as an intensely personal experience, and reminded me of the privilege that it is to come alongside people in the clinic. As for hyperacusis, I found portrayals indicating the social isolation that some people experience with the symptoms of collapsed tolerance for sound. I immensely enjoyed writing this chapter.

You are involved in a wide range of different sorts of research topics. What research topic or question in hearing and otology currently excites you?

So many! I think one of the things that is really exciting at the moment is the vibrancy of the field, and to know how much exciting work is actually going on. I'm very interested in the application of pharmacology. Some of the recent work on KV3 fast-acting potassium channel modulators is potentially very exciting indeed with regard to tinnitus, and the improvement of hearing problems for those who achieve mediocre results with hearing aids and cochlear implants.

So what would you say to a patient who might ask you whether there might ever be a pill for tinnitus?

This question actually comes up every day in the clinic: a pill for tinnitus, a pill for hearing loss, a pill for imbalance. What I share with patients is that we don't have those solutions yet: but that we are working extremely hard on these challenges with a number of international collaborations and clinically focused research projects.

Pharmacological research I realise is not easy. What do you think is the biggest challenge facing tinnitus research at the moment?

Although it's a lot of hard graft, and not particularly glamorous, there's much good ongoing work producing the basic building blocks of our understanding: epidemiology, natural history, physiological correlates of tinnitus and

reliable outcome measures. All this basic work is essential to actually identify targets for therapy. Is the target tinnitus loudness? Is it tinnitus-related stress? Is it tinnitus impact? Each of these may require a different intervention; drugs, sound therapy or psychological therapy. But we shouldn't lose sight of the horizon for the new understandings and perspectives on tinnitus. What's absolutely essential is for clinicians and basic researchers to keep in close dialogue and work together to maintain a shared vision of what that horizon might look like.

I agree. I think we've seen a shift over the years with some conferences and meetings actively trying to encourage that dialogue between basic researchers and clinicians. Where do you think the biggest advances in the field might be in the next 5-10 years?

The particular area where I would like to see some benefits gained would be for tinnitus to be regarded and respected as a sub-specialty within audiology and otology, with specific training and with people specialising in that particular field. I also think the prospects of pharmacological treatment for new onset tinnitus are strong. Clearly chronic tinnitus is a different and perhaps a more challenging problem, and so I think stopping tinnitus in its tracks early on is potentially a solvable problem.

And how might you see that translating into clinical practice?

I think that the clinical need is so compelling that the translation will be rapid. I'm more concerned about the translation of clinical insights into the neuroscience research. I see some of that, but not enough.

You're an active member of the TINNET EU COST Action, tell us why did you get involved in this European tinnitus research network?

TINNET is a fantastic example of the new paradigm in tinnitus research. It is collaborative rather than competitive. It is multidisciplinary rather than single focus. And it is informed by a spirit of generous and respectful dialogue. That's

a compelling invitation to be drawn in.

What could be the benefits to other audiology professionals or ENT physicians if they were to get involved in TINNET?

This is not at all a closed community, and I think many people would benefit from the interaction that is offered. TINNET is an opportunity to plug in to the collective intelligence and experience of a tinnitus community. Between the different members that community has several hundreds of years of tinnitus experience, both clinical and research. That's an invaluable resource for somebody coming to the field new or somebody working perhaps in isolation, or even somebody working in a group that wants to refresh and renew their perspective.

What do you think TINNET may achieve over the next few years that remain on the EU grant?

I think the TINNET initiative will make a major contribution to the fundamental enabling work that I've described, and I think that will be the building blocks of future research. But some of the projects that have been started are clearly going to outlive the initiative. One in particular is the patient-focused outcome measures, which I think has some years yet to run once TINNET has dissolved.

I'd agree with you there. The challenge will be to keep that motivation and engagement going beyond the current funding envelope.

Absolutely. In a sense it's wise for TINNET to have some projects like that, that will outlive the term so that this spirit of collaboration will continue.

The first TINNET conference (<http://tri2016.ihr.mrc.ac.uk/>), which will be a major international event is coming to Nottingham in March 2016. What's your involvement in that?

I've got a couple of different roles. First, I'm giving a keynote on the relationship between tinnitus and hyperacusis. Whilst these two symptoms often co-exist, this does not necessarily imply a causal

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relationship, and I want to explore that in some depth. Second, I’m involved in a networking event drawing commercial and industry partners into the TINNET COST conversation as a valued and respected partner. This promises much in terms of resetting the terms of engagement and mutual dialogue.

And finally, is there anything that you would like to add for the readers of ENT and Audiology News that we haven’t already covered?
I would like to find a time machine, so

that I could go back to 1985 and talk to the people who told me that tinnitus was a fruitless area for research and clinical work, and to gently persuade them that they may not have been telling me the entire truth.

Further reading

- Website of the TINNET/TRI 2016 conference: <http://tri2016.ihr.mrc.ac.uk>
- TINNET industry networking event: <http://tri2016.ihr.mrc.ac.uk/satellites/industryNetworking/index>
- Baguley DM, Fagelson M (Eds). (2015). *Tinnitus: Clinical and Research Perspectives*. San Diego, USA; Plural Publishing; 2015.



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None declared.