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North West Anglia
NHS Foundation Trust

Patient Information

Hyperacusis & Misophonia



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6. Breathing Control Exercises

By taking control of our breathing, we restore the balance of oxygen and carbon dioxide in our blood which in turn reduces our adrenaline and tension.

Our goal is to slow our breathing down and to breathe at an even, constant rhythm. Breathe in through your nose to allow the nasal hairs to filter out the dirt, so the air is warm, clean and moist before it enters the lungs.

To breath correctly, we need to use our diaphragm. To check this, place one hand on your chest and one just below the ribs. As you breath the stomach should be rising and falling, not the upper chest. This way the whole of your lung capacity is used.



Image taken from: www.wondergressive.com

- Gently breathe in; not too deeply.
- Breathe out and let your shoulders drop, and relax your hands
- Take a moment to pause and say to yourself **relax**.
- Repeat this once or twice, at least four times a day.

These breathing exercises can be done anywhere, anytime or anyplace.

(misophonia) as well as increasing your tolerance to sounds (hyperacusis).

It can sometimes be helpful to use **sound therapy** as part of the desensitisation process. Sound therapy involves introducing sound into your environment in order to dilute the sounds that you are finding unpleasant. It can also reduce the amount of scanning your brain may be doing to look for potentially uncomfortable or upsetting sounds. Your audiologist may discuss the possibility of trying white noise generators worn in the ears as part of your treatment process. These should be used as a temporary measure and should not be seen as a long term solution. It is important to have times when you are still exposed to the triggering sounds in order to learn to manage them better and desensitise yourself to them.

Another example of sound therapy may be introducing enjoyable and relaxing background music playing whilst you eat dinner with your family. There are also sound generation applications which can be used to introduce relaxing sounds into your environment.

4. Other Types of Sound Sensitivity

Recruitment is the term used to describe the abnormal loudness growth associated with hearing loss. People with hearing loss may notice that although they may find it hard to hear soft or even moderate sounds, they may also find that louder sounds are uncomfortably loud.

5. Useful Links

<https://www.tinnitus.org.uk/hyperacusis>

<http://www.hyperacusis.net/>

<https://www.tinnitus.org.uk/misophonia>

1. What is Hyperacusis?

Hyperacusis is the term used to describe a collapse in sound tolerance, leading to everyday environmental sounds becoming intrusively loud, uncomfortable and sometimes painful. Hyperacusis may develop gradually or start very suddenly; and may affect one ear or both ears. Hyperacusis affects people to varying degrees, from being somewhat irritating to extremely traumatic.

Causes

Hyperacusis may be idiopathic - in other words there may not be an obvious cause - or it may be triggered by an event. Sometimes it develops after loud noise exposure, such as industrial noise, exposure to loud music or sudden loud sounds such as a firework exploding or a car airbag deploying. Head injuries can sometimes trigger hyperacusis.

Some medical conditions may be linked with hyperacusis, such as Lyme's disease, Meniere's disease, Bell's palsy, William's syndrome, Autism Spectrum Disorders, Down syndrome and chronic pain disorders such as fibromyalgia, complex regional pain syndrome and migraine.

Some ear surgeries may be associated with hyperacusis. It is also possible that middle ear congestion or even a wax impaction could lead to an abnormal perception of loudness after they are resolved/removed.

Hyperacusis can be experienced in conjunction with mental health conditions such as anxiety, depression or Post Traumatic Stress Disorder. Some people may notice a collapse in sound tolerance following a traumatic life event, such as bereavement or a stressful experience at work.

Treatment

In the first instance, wherever possible, it is important to manage any medical conditions which are felt to be contributing to the hyperacusis. This may not always be possible but a full medical assessment should have occurred before you are referred to talk to an Audiologist about your hyperacusis.

Many people experiencing hyperacusis begin to use noise protection devices such as ear plugs and noise cancelling headphones to avoid the sounds to which they are sensitive. Unfortunately, in the long run, this usually leads to an increase in sound sensitivity through auditory deprivation. It is very important that you work with your Audiologist to develop tactics to reduce your use of noise protection devices if you want your hyperacusis to improve.

Systematic desensitisation may be helpful in treating hyperacusis. Please see Section 3.

If you are a friend, family member or colleague of a person experiencing misophonia, it may be helpful to assure them that you are not making the triggering noises on purpose.

It can be helpful to agree ways that the person experiencing misophonia can raise their concerns about triggering noises with you so that you can both try to develop a plan to manage it.

Practising kindness and compassion in our thoughts can also be helpful. For example, instead of thinking that your Dad is deliberately making a noise to upset you, or doesn't care about you enough not to make the noise, try thinking 'I am trying hard to cope with this and I know my Dad is too.'

Find ways to **manage the difficult emotions** you may be experiencing, such as anger, disgust and anxiety. It can be helpful to practice breathing control exercises to use when you feel yourself becoming upset. Meditation and relaxation techniques may also be helpful and come in many forms try to find one that suits you. Progressive muscle relaxation may also be a useful tool as you may find that your body becomes very tense when you hear a triggering noise and this can add to feelings of anxiety and the fight or flight response.

3. Systematic Desensitisation + Sound Therapy

It is very common for people experiencing hyperacusis and misophonia to try to avoid triggering sounds. This avoidance behaviour can become extreme and can significantly affect your life by restricting what you think you can and cannot do.

It can be helpful to **systematically desensitise** yourself to triggering sounds. This involves very gradual and slow exposure to the triggering sounds or environments whilst practising management strategies such as thought challenging, breathing control, compassionate thoughts, distraction, meditation and relaxation. This process can take time and patience but in the long run aims to reduce any emotional response you have to the triggering sounds

Treatment

Misophonia is **no-one's fault**. The person experiencing the emotional reaction is not to blame, but neither is the person making the noise. It is important to remember that the person making the triggering noise is almost certainly not doing it on purpose. They are likely unaware of the fact that the noise is upsetting you so much. The way people eat, breathe, speak and act is habitual, automatic and unintentional.

Thought challenging may be helpful in reducing your emotional response to triggering sounds. For example, if you think that a person is making a sound deliberately to annoy you, ask yourself if there is an alternative possibility such as the fact that they don't even realise they are making the sound, or they can't hear the sound themselves as they may have a hearing loss. You might catch yourself thinking, 'I hate the way he breathes, it is disgusting, I want to hit him'; instead try to think, 'It is just breathing noises, they are normal and natural, I am learning to cope with this, keep calm.'

It can be really helpful to sit down with family, friends and co-workers and **talk about** what it means to live with misophonia, from both perspectives. It can be helpful to think about and discuss how it makes you feel when people make triggering noises. For example, someone experiencing misophonia may feel that their partner must not love them when they make triggering noises as they have been asked not to do it in the past. Telling your significant others how you feel gives them an opportunity to reassure you of how they feel about you and share their own feelings about your reactions to the triggering sounds; which can sometimes be difficult if they involve anger or frustration.

Try to choose a time to talk about misophonia when everyone is feeling calm and there has not been a triggering noise. It may be helpful to set aside time each week to talk about misophonia and then allow the rest of the week to be free from focus on misophonia.

2. What is Misophonia?

Misophonia is the term used to describe a strong emotional response to certain types of sounds. People experiencing misophonia will have normal perception of sound loudness and will not have collapsed sound tolerance. The most common sounds to trigger an emotional response in people experiencing misophonia are those made by the people around them; such as sniffing, chewing, clicking a pen, rustling crisp packets or tapping on a keyboard. These sounds are often believed to be under the voluntary control of the person making them. It is very unusual for people experiencing misophonia to be triggered by involuntary sounds, such as a gurgling tummy.

People experiencing misophonia will often believe that the person is choosing to make the noise the way they are. The anticipation of the sound can also be enough to trigger the emotion even before the sound has happened.

Misophonia can often develop in childhood or adolescence and might start with noises made by just one member of the family as the main trigger. Over time, the number of people and the types of sounds that may trigger emotions may widen.

Misophonia can have a huge impact on the people experiencing it, as well as their family, friends and co-workers. It can make interpersonal relationships difficult at times.

Emotions

The 3 most common emotions triggered by sound in misophonia are:

1. **Anger.** This is the most common emotion felt by people experiencing misophonia. Anger is triggered by a feeling that the person making the sound has broken some sort of rule, such as rules around acceptable standards of behaviour. e.g. "Sniffing is rude and selfish and is a sign of bad upbringing."
2. **Disgust.** "Eating with your mouth open is disgusting. I want to get as far as possible away from this horrible behaviour."
3. **Anxiety.** Anxiety is triggered when the sound being made is perceived as a threat. You may not feel threatened by the sound itself, but may feel anxious around having to endure the sound or what your reaction may be to the sound.

Physical Sensations

Physical sensations linked with the fight-or-flight response are common in misophonia. The fight-or-flight response is a natural, physiological response to perceived threat. It is designed to set our bodies up to either run away from a threat or fight it off. The response is useful when the threat is real - such as needing to run away from a grizzly bear in the woods - but it is less helpful when it happens in response to perceived threats, such as sound.

