

Adult hearing loss and tinnitus health research: roundtable discussion

15 December 2020



AGENDA

- Welcome and opening comments
- Research commissioners / funders

- Scene setting
- Roundtable discussions

Closing remarks

Opening comments

Lord Bethell of Romford



Parliamentary Under Secretary of State (Minister for Innovation)

Research commissioners / funders

National Institute for Health Research (NIHR)

Claire Kidgell

British Tinnitus Association (BTA)

David Stockdale

Royal National Institute for Deaf People (RNID)
Ralph Holme

UKRI Medical Research Council (MRC)

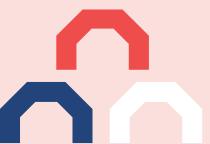
Clara Fons



Setting the scene



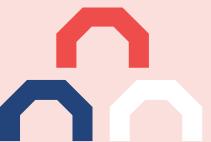
- GENERATE & ENT hearing and balance national priorities (Anne Schilder)
- Priority setting partnerships and Cochrane reviews (Derek J Hoare)
- NICE clinical guidelines and research recommendations for hearing loss and tinnitus (Kevin J Munro)





GENERATE & ENT hearing and balance national priorities

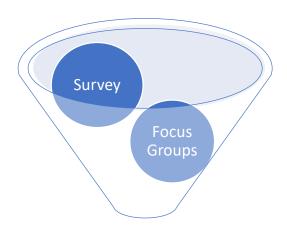
Anne Schilder
NIHR University College London Hospitals BRC



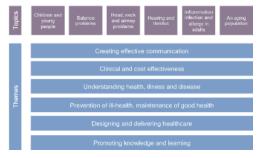
The Research Agenda for ENT, Hearing and Balance Care

A UK Partnership of Patients, Professionals and the Public





Framework for GENERATE research agenda



Expert forum

Consensus Conference



1500 research ideas

670 research ideas

99 research ideas

21 research priorities



GENERATE

Adult Hearing Loss and Tinnitus

- Patients, Professionals and the Public in Partnership
- What is the burden and impact of hearing loss on an individual, family and population level?
- Which hearing aid strategies work best for adults with hearing loss?
- What are the best management strategies for tinnitus?
- What are the effects and costs of novel medical and biological treatments for sensorineural hearing loss?

REgeneration of inner ear hair cells with a GAmma-secretase inhibitor. A phase I/II regenerative drug trial for hearing loss

- EU Horizon 2020 consortium UK, Greece, Germany, Netherlands, Denmark - €5.8 M
- Regain

 THERAPEUTICS

 Regain

 Topostart

 Topostart

 Tubingen

 Theory and Repodiction

 Theory and Repodiction

 Theory and Repodiction

 Topostart

 Tubingen

 Theory and Repodiction

 Theory and Theory and
- Phase I trial 2017-18: approach is safe
- Phase II trial 2019-20: write up
- Worldwide interest:
 - 4,907 patients wanting to take part
 - features in international media





Next steps



Build capacity and capability to deliver prioritised research











Foster research collaborations to develop and deliver cross-

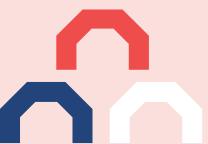
specialty research





Priority setting partnerships and Cochrane reviews

Derek J Hoare NIHR Nottingham BRC



JLA Priority Setting Partnerships





Priority Setting Partnerships

- Steered by patients and professionals
- Decisions about project scope, information, and dissemination made by the steering group
- Information co-produced

JLA Priority Setting Partnerships

ENT as	pects	of ba	lance	(2011)	
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- Training health professionals
- Treatment (drug, surgical)
- Diet, exercise, stress

Tinnitus (2012)

- Treatment (psychological, drugs, hearing aids)
- Population (children, Deaf)
- Subtyping and mechanism

Mild to moderate hearing loss (2015)

- Hearing aid use and benefits
- Hearing preservation
- Hearing test accuracy
- Stem cell

Hyperacusis (2018)

- Training health professions
- Populations (children, autism)
- Treatment (self-help, psychological, sound therapy)



JLA Priority Setting Partnership progress

Tinnitus

(T)

British Tinnitus

Association

- Paediatric tinnitus guidelines
- Trials of CBT
- Trails of hearing aids
- Doctoral training programme
- Systematic reviews

The Ear Foundation







Mild to moderate hearing loss

NIHR Career Development Fellowship

Dr Helen Henshaw

Behavioural intervention to improve beneficial use of hearing technology for adults



Hyperacusis

NIHR postdoctoral fellowship

Dr Kathryn Fackrell

A digital intervention for education and self-management of hyperacusis





Cochrane reviews

- Systematic review to answer a specific research question (intervention, diagnostic test accuracy, prognosis,..)
- Identify, appraise and synthesise all the empirical evidence that meets prespecified eligibility criteria.
- Minimise bias and inform decision making.





Cochrane reviews

Hearing aids for mild to moderate hearing loss in adults

Melanie A Ferguson, Pádraig T Kitterick, Lee Yee Chong, Mark Edmondson-Jones, Fiona Barker, Derek J Hoare

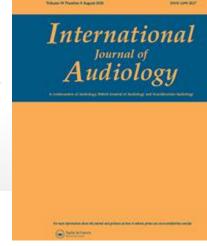
Bilateral versus unilateral hearing aids for bilateral hearing impairment in adults

Anne GM Schilder, Lee Yee Chong, Saoussen Ftouh, Martin J Burton Authors' declarations of interest

Technical Reports

A process for prioritising systematic reviews in tinnitus

Magdalena Sereda ☑ ⓑ, Don McFerran ⓑ, Emma Axon, David M. Baguley, Deborah A. Hall ⓑ, Iskra Potgieter, Rilana Cima, Samantha Cox & Derek J. Hoare ⓑ ...showless
Pages 640-646 | Received 19 Oct 2018, Accepted 18 Feb 2020, Published online: 05 Mar 2020



Taking priorities forward





Priority questions



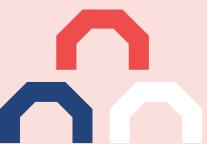
Evidence synthesis, further questions, methodological recommendations

Researcher-led funding application

Work with funders to inform commissioned calls

National Institute for Health and Care Excellence (NICE): Clinical Guidelines and Research Recommendations

Kevin J Munro NIHR Manchester BRC



NG 98 (2018): hearing loss in adults





Hearing loss in adults: assessment and management

NICE guideline
Published: 21 June 2018
www.nice.org.uk/guidance/ng98

NG 155 (2020): tinnitus





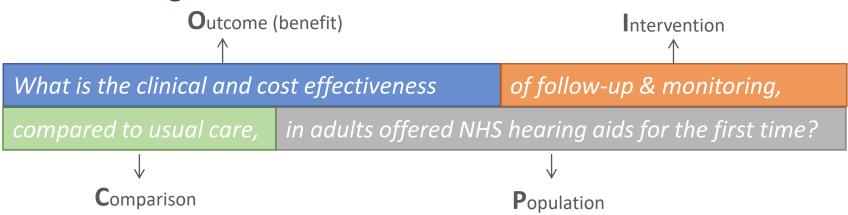
Tinnitus: assessment and management

NICE guideline

Published: 11 March 2020 www.nice.org.uk/guidance/ng155

Examples of priorities

Hearing loss in adults



Tinnitus

What is the clinical and cost effectiveness	of audiological assessment,
compared to no audiological assessment,	for people with tinnitus?



Recommendations for clinical practice

For 50-60% of the priority topics, no evidence on which to base clinical recommendations

Where evidence was identified, the quality was typically low

Recommendations for research

HEARING LOSS:

Follow-up and monitoring of new hearing aid users

Funded

- Earwax management
- Hearing aids and dementia
- Prevalence in under-represented groups
- Treatment of idiopathic sudden hearing loss

Grant outcome pending

TINNITUS:

Sound therapy and support

Commissioning under consideration

- CBT by professionals other than psychologists
- Assessing in general practice
- Neuromodulation
- Therapies for children



HTA commissioned research



BRCs: catalyst for national initiatives

Hearing partnership (Manchester, Nottingham, UCLH)

National research infrastructure

- NIHR Hearing Health Informatics Collaborative
- Hearing Medicines Discovery Catapult

National research projects

Population survey on public perception of prevalence and risk

Large-scale research projects

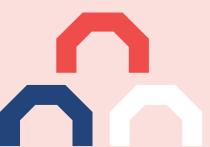
- NIHR HTA funding: Follow-up and monitoring of adults with hearing loss
- FUNDED: NIHR development grant on eHealth adult hearing screening and intervention



Roundtable discussions



- Hearing loss, tinnitus and healthy ageing (KJM)
- Understanding causes and risks for adult hearing loss and tinnitus (DJH)
- Infrastructure & training for adult hearing loss and tinnitus (AS)





Hearing loss, tinnitus and healthy ageing

Kevin J Munro NIHR Manchester BRC



- No 1 for years lived with disability
- Impact
 - Communication and social interactions
 - Anxiety, isolation, depression
 - Associated with cognitive decline
- Cost (hearing loss and tinnitus)
 - Economy and NHS
- Interventions
 - Devices
 - Tinnitus Management Strategies

Selected examples of research needs

POPULATION DATA

- Validity of UK data?
- An inevitable consequence of ageing?

ASSOCIATION WITH HEALTH CONDITIONS

- Brain & physical health
- Do treatments delay adverse functional outcomes?

SERVICES & INTERVENTIONS

- Uptake
- Adult hearing screening
- Interventions: devices, drugs, genes and cells
- Behaviour change

INEQUALITIES

- High burden, low access
- Mechanisms & clinical pathways
- Cross-cutting

HEARING LOSS, TINNITUS AND HEALTHY AGEING

SHORT TERM

What is needed NOW? Opportunities and low hanging fruit.

MEDIUM TERM

What is needed in the NEXT 5 YEARS?

LONG TERM

Long-term research aspirations for adult hearing loss and tinnitus?





Understanding causes, risk factors, and diagnostics of adult hearing loss and tinnitus

Derek J Hoare NIHR Nottingham BRC

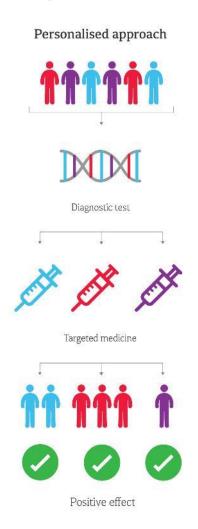




- Studying the hearing and genetic characteristics of large cohorts of people can provide key insights into causes (e.g. noise exposure, aging) and risk factors (e.g. genetics)
- Understanding causes and risk factors essential to informing research to prevent, modifying risk, or treat hearing loss and tinnitus

- Systematic reviews
- Programmes of basic research
- Work to advance understanding of noise-induced hearing loss involving Department of Defence
- Large longitudinal datasets (UK Biobank)
- NIHR Health Informatics Collaborative
- National Registry of Hearing Implants





Example challenge

New drug and advanced (gene & cell) therapies are in development, and these will need to be targeted at specific individuals based on detailed understanding of the cause(s) and characteristics of their hearing loss or tinnitus

Existing large research cohorts (e.g. UK Biobank) do not involve detailed information about hearing status

Detailed hearing status also not captured in routine primary care records.

CAUSES, RISK FACTORS, DIAGNOSTICS

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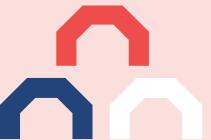
Long-term research aspirations for adult hearing loss and tinnitus?





Infrastructure and training for research into adult hearing loss and tinnitus

Anne Schilder NIHR UCLH BRC



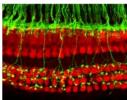
Disciplines involved in hearing and tinnitus research and care

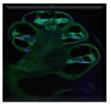
- Cell biologist
- Neuroscientist
- Geneticist
- Acoustics engineer
- Datascientist
- Clinical trials methodologist
- Health economist
- Epidemiologist

- Audiologist
- ENT surgeon
- Audiovestibular physician
- Speech language therapist
- Psychologist
- GP
- Old age psychiatrist
- Neurologist

And their trainees....













Building hearing & tinnitus research infrastructure

- Generating and leading research
 NIHR | Academy NIHR | Biomedical Research Centre
 - MRC, Wellcome, NIHR fellowships
- 2. Delivering research





- NIHR CRN Workforce Development
- Utilise trials to develop capacity and capability

Building hearing & tinnitus research infrastructure



NIHR CRN Audiology Champions and Trainee Leads



- Management and outcome of sudden onset hearing loss
- 70 NHS hospital teams and 280 participants so far
- Builds infrastructure for upcoming trials



INFRASTRUCTURE AND TRAINING FOR RESEARCH INTO ADULTS HEARING LOSS AND TINNITUS

SHORT TERM

What is needed NOW? Opportunities and low hanging fruit.

MEDIUM TERM

What is needed in the NEXT 5 YEARS?

LONG TERM

Long-term research aspirations for adult hearing loss and tinnitus?





Closing remarks

If you would like to share any thoughts / comments on any of the topics covered in the discussions that you couldn't raise today, or about this event generally, then please contact



jason.cox@dhsc.gov.uk