

# Editorial

## Tinnitus and Self-Harm Revisited

DOI: 10.3766/jaaa.29.3.1



Conventional wisdom (CW) would dictate that there is a subset of patients who have bothersome or disabling tinnitus and whose coping skills are insufficient. These are the patients who are evaluated and managed in our tinnitus clinics. The CW also states that there is a subset of that subset for whom the tinnitus has become unbearable and it is these individuals that have contemplated self-harm and suicide. A subset, of the subset, of the subset, not only have contemplated self-harm or suicide but have made an attempt.

A number of years ago I had heard my colleagues, in the course of their case history taking, asking tinnitus patients if they had ever contemplated taking their own lives. I could not help but think that if I was that patient and I had not considered suicide as a possible outcome of having tinnitus then I might place suicide on my menu of possible options. Shortly thereafter, we decided to review what had been published from 1966 to 2001 on the topic of tinnitus and suicide (Jacobson and McCaslin, 2001). What we found was surprising. We found a total of three published reports on this topic and none showed a cause-and-effect relationship between tinnitus and self-harm/suicide. Some patients demonstrated histories of clinically significant depression and/or anxiety. The net/sum of our little study was that it was unlikely that the tinnitus caused suicide. It was more likely that, in extraordinary circumstances, a patient who was severely clinically depressed who was faced with a stressor they feared they could not control

(i.e., tinnitus) might become so desperate they might harm themselves.

In this issue of the *Journal*, Aazh and Moore have taken another look at this topic. The authors have evaluated the responses of 150 individuals (out of a total of 402 potential subjects) who completed a series of questionnaires (e.g., Tinnitus Handicap Inventory, Hospital Anxiety and Depression Scale) including Item 9 from the Patient Health Questionnaire (PHQ-9). That item addressed suicidal ideations not specific to tinnitus. This item was stated, "Over the past two weeks, how often have you been bothered by the thought that you would be better off dead or of hurting yourself in some way?" The answers included "Not at all," "Several days," "More than half the days," and, "Nearly every day."

In this article, the authors make suggestions about what should be included on this topic in the assessment of tinnitus and hyperacusis. I am not going to "spill the beans." I encourage you to read this interesting article in this issue of *JAAA*.

Gary P. Jacobson, Ph.D.  
Editor-in-Chief

### REFERENCE

Jacobson GP, McCaslin DL. (2001) A search for evidence of a direct relationship between tinnitus and suicide. *J Am Acad Audiol* 12: 493-496.