
EDITORIAL

A Happening

The recently concluded meeting of the International Tinnitus Forum conducted on September 23, 2000, in Washington, DC, provided significant information to tinnitus patients and professionals involved in clinical and basic scientific efforts directed at both diagnosing and treating tinnitus. Specifically, intratympanic drug therapy, nuclear brain imaging, and neuroprotective drug therapy were addressed. The meeting provided insight into the state of the art of diagnostic and treatment modalities for tinnitus relief and provided a glimpse into the future of such endeavors.

Intratympanic drug therapy is a modality that introduces medication into the middle ear for perfusion of the inner ear of a patient with symptoms of hearing loss, tinnitus, vertigo, and ear blockage, either alone or in combination. Reports by specialists at the September 2000 meeting revealed that this therapeutic technique offers a significant degree of relief to patients with severe disabling tinnitus of a predominantly cochlear type.

Other reports presented at the meeting promoted nuclear brain-imaging techniques as a method for establishing an accurate diagnosis of tinnitus and for monitoring the efficacy of treatment aimed at tinnitus control. These techniques also provide a method by which to draft a molecular map of the underlying neurochemistry involved in areas of abnormal brain function.

Finally, neuroprotective drug therapy has been shown to provide a neuropharmacologic approach to maintenance, improvement, and restoration of impaired neuronal function.

The editorial board members of the *International Tinnitus Journal (ITJ)* are actively involved in developing basic scientific and clinical experience in each of these areas. The journal remains dedicated to disseminating information about these topics as it becomes available. For instance, reports regarding intratympanic drug therapy have been published in issues 3:2, 4:2, 5:2, and 6:1 of *ITJ*.

Future issues of *ITJ*, the official journal of the Neurotological and Equilibriometric Society and the International Tinnitus Forum, will continue to include evolving clinical experiences with intratympanic drug therapy, nuclear brain imaging, and neuroprotective drug therapy, with a focus on intratympanic drug therapy for inner ear complaints and the symptom of severe, disabling tinnitus of the predominantly cochlear type.

The presentations at the September 2000 International Tinnitus Forum were audiotaped and are available from the Martha Entenmann Tinnitus Research Center. A summary of the meeting's proceedings follows as an addendum to this editorial.

Abraham Shulman, MD, FACS