
Honor Acceptance

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Mr. President and Chairman, Professor Claus Claussen, honored guests, friends, and colleagues of the Neuroequilibrimetric Society, thank you for the honor extended to me and which I accept on behalf of my family, coworkers, and myself for efforts in which we have been involved for both tinnitus diagnosis and treatment. My wife, Arlene, and I thank you, Professor Claussen, and your organizing committee for the many courtesies extended to us since our arrival in Bad Kissingen.

To my wife, Arlene, and our wonderful family of over 40 years who have, in the past 18 months, been blessed by our first grandchild, Olivia Ann Goldring: I thank you for your love, friendship, and support for all efforts in which we have been involved—first, for family and, second, for sharing together frustrations and satisfactions for both patient care and clinical research.

To Barbara Goldstein, a colleague, coworker, and friend for over 28 years: Together we have shared the satisfaction and frustrations involved in clinical research not only for the symptom of tinnitus but for problems and challenges in the field of neurootology and audiology highlighted by symptoms of hearing loss, vertigo, ear blockage, and tinnitus either alone or in combination.

To my friend and colleague, Professor Claus Claussen, and his wife, Erica: Ours is a friendship that grows each day, gaining satisfaction from our families and results of collaborations in which we are involved. Barbara and I share with you, Claus and Erica, your dreams, satisfactions, and frustrations of all our collaborations, highlighted by the *International Tinnitus Journal*.

I have been a member of the Neurootological and Equilibrimetric Society (NES) since 1984, at which

time I paid my first visit to Bad Kissingen and the NES pre-congress meeting. The honoree was Dr. Wally Rubin. I was pleased to participate in a program honoring his contributions (which have been ongoing) for neurootological complaints highlighted by balance disorders. I was impressed initially with the vitality of the NES and the freedom of exchange of ideas between the attendees and membership. This has continued to date. Today, at the start of the twenty-fifth anniversary meeting of the NES, all of us say thank you Professor Claus Claussen, Erica, and your coworkers for your vision, planning, and dedication, which have provided a forum in which the discipline of neurootology is recognized and its growth and development assured. All of us thank you, Professor Claussen, for your outstanding contribution on this occasion of the twenty-fifth anniversary meeting of the NES, which now boasts a membership in excess of 600 and satellite organizations all over the world.

Whatever recognition or appreciation is extended to me and my coworkers for problems in neurootology highlighted by tinnitus, I give thanks and appreciation in return to my teachers. First, my medical education at the University of Berne, Switzerland, taught me that in order to be an excellent physician, basic sciences—highlighted by pathology, physiology, and clinical medicine—need to be respected and integrated into clinical efforts for diagnosis and treatment. Clinically, the need to respect the patient was emphasized. In order to formulate protocols for treatment, an attempt should always be made to understand the underlying disease processes. The teaching was that the physician keep an open mind to new modalities of therapy and do no harm to the patient.

As a child, I benefited from a mother and father dedicated, at great sacrifice, to satisfying the educational desires and objectives of their son. The example was set forth by an uncle, an otolaryngologist, Dr. Jack Sarnoff, who provided an insight to the satisfactions that one can derive from the delivery of patient care.

The curriculum at medical school, which allowed me to spend 2 years developing a dissertation on laryngotracheobronchitis, provided me with an opportunity to work closely with Professor of Otolaryngology Franz

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Escher. He taught me the significance of clinical observation, interpretation of surgical results, and respect for the literature of the past.

The residency at Kings County Hospital in Brooklyn provided a firm basis in clinical otolaryngology. I was fortunate to have many teachers who were generous in nature and patient with my questions. Shokri Radpour continues to this day to be a friend and confidante. Dorothy Wolffe, pathologist of Julius Lempert, introduced me to the wonders of temporal bone pathology. The experience as a fellow with Julius Lempert in 1960 brought me into contact with "giants" in the field of otology—Von Beckesy, Julius Rosenwasser, Thomas Rambo, Weaver, and Lawrence. Little did I know then how I would return to my notes of their lectures in auditory physiology to seek answers to questions reflecting my growing interest for the symptom of tinnitus.

In 1974, Samuel Kountz offered me an opportunity to become Director of Otolaryngology at the Health Sciences Center at Brooklyn, State University of New York (HSCB-SUNY). At that time my interest was in developing programs for cochlear implantation for deafness. However, the economics and reality of practice in the HSCB-SUNY community did not lend itself to an operative procedure that cost in the range of \$30,000. The priorities of the otolaryngology program that I was asked to direct were not highlighted by the cochlear implant. Together with Barbara Goldstein, who served as coordinator of the otolaryngology program and director of audiology, I decided to concentrate on the symptom of tinnitus. This concentration allowed us to continue our interest with electrical stimulation of the auditory system for deafness. We were fortunate to have the support of the President of HSCB-SUNY, Calvin Plimpton, and of the Professor and Chairman of the Department of Surgery, Samuel Kountz. Under the leadership of the Dean of the College of Medicine, Irwin M. Weiner, in 1992, a tinnitus laboratory and tinnitus center were established at the HSCB-SUNY. Since 1992, this support continues to be offered by our present Chairman of the Department of Otolaryngology, Frank E. Lucente.

Interest in the symptom of tinnitus has made me a better otologist and neurootologist. It has given me an understanding of the cochleovestibular system that otherwise I would never have had. It has brought me into contact with leaders in the field of auditory science. Jack Vernon and his group of coworkers introduced both Barbara and me to the symptom of tinnitus and a respect and appreciation of the complexities involved. Juergen Tonndorf taught me principles of acoustics and provided a "sounding board" for my clinical speculations concerning mechanisms of tinnitus production, protocols for therapy, and scientific approaches for clinical observations.

If I were asked, "What do you consider to be your most significant contribution to date in the field of tinnitology?", I would say, "It is the opportunity afforded to form lasting friendships based on mutual respect and to share one's clinical experiences with clinicians and investigators worldwide." The past and present collaborations assure for the tinnitus patient the goal that all of us strive to achieve—namely, the development of a cure for all clinical types and subtypes of tinnitus and ultimate relief for the tinnitus patient.

The opportunities afforded to me as director of a division of otolaryngology of the department of surgery allowed me to benefit from an exchange of ideas among students, residents, and teachers. Such exchanges have been stimulating and productive specifically for the symptom of tinnitus diagnosis and treatment. The integration of an academic and clinical experience teaches one to know one's limitations and when to ask for advice.

Particular satisfaction from our tinnitus experience has come from the international interest and appreciation expressed to us by both patients and colleagues. To provide a tinnitus patient with relief has provided a professional satisfaction equal to that of an improvement of hearing after stapedectomy or tympanoplasty. Frustrations by both patients and professionals are respected and are considered to reflect the complexity of the symptom of tinnitus and one's failure to provide tinnitus relief.

Professional satisfaction has been highlighted by the establishment of an interchange of information between colleagues and the development of international friendships and collaborations for both tinnitus diagnosis and treatment. The collaborations have been an outgrowth of initial educational programs designated as the *international tinnitus seminars* and the *international tinnitus study group*, now known as the *international tinnitus forum*. From the start, an international approach to tinnitus diagnosis and treatment was the goal. The international tinnitus seminars have been ongoing since the First and Second International Tinnitus Seminars in New York, June 8–9, 1979, and June 10–11, 1983. It was a distinct honor to have the first overseas meeting in Münster, Germany, in 1989 under the chairmanship of Professor Harald Feldmann. Harald is one of the few investigators who has made a solid contribution to understanding the symptom of tinnitus by his identification of the Feldmann masking curves. We thank Harald and his wife, Ursula, for their courtesies at that meeting and the honor extended to my family, coworkers, and me. We look forward to the upcoming Sixth International Tinnitus Seminar to be held in Cambridge, England, under the chairmanship of Jonathan Hazell. Courses and meetings with Professor Poch-Broto in Madrid and Joseph Traserra in Barcelona; Carlo Oli-

veira in Brazil most recently; and the upcoming meetings in Portugal with Professor Seabra and in Japan with Professor Sakata have contributed to establishing the significance of the symptom of tinnitus within the medical community and have expanded the base of professional activities worldwide for the tinnitus patient. Courses of instruction have been ongoing at the American Academy of Otolaryngology since 1983 for the symptom of tinnitus. A correspondence has been established now with more than 2,000 individuals who annually are invited to attend the International Tinnitus Forum. The Forum presents ongoing information of interest to professionals involved with tinnitus diagnosis and treatment and takes place at the onset of the American Academy of Otolaryngology, Head and Neck Surgery meetings.

The Lionel Hampton Ear Research Foundation was the initial sponsor of education in research activities for tinnitus in which we have been involved. Since 1995, the establishment of the Martha Entenmann Tinnitus Research Center, Inc., has provided us with an ability to develop and expand clinical research goals, highlighted by attempts to improve the accuracy of tinnitus diagnosis; development of a neuropharmacology for tinnitus; development of an operative procedure for a primarily cochlear-type tinnitus; and establishment of the *International Tinnitus Journal*. The designation of the *International Tinnitus Journal* as the official journal of the Neurootological and Equilibriometric Society in 1996 has allowed the expansion of tinnitus information worldwide.

Under the sponsorship of the Martha Entenmann Tinnitus Research Center, Inc., collaborations now exist with 13 investigators in three countries. Collaborations at this time continue with Arnold M. Strashun, chief of the department of nuclear medicine of HSCB-

SUNY, for SPECT investigation of brain in patients with tinnitus for both diagnosis and treatment monitoring; Albert Stracher and Richard Salvi in New York for investigation of calpain antagonists for noise protection and tinnitus control; Ellis Douek in England for electrical stimulation; M. Miles Goldsmith in Georgia and Robert Quinta and Richard Dugot in New Jersey for electrical stimulation and tinnitus control; Richard Nodar in Ohio for audiology and development of the second edition of our text *Tinnitus—Diagnosis and Treatment*; Claus Claussen and his associate for adaptation of the vestibular evoked response for understanding and prescribing for the symptom of tinnitus; Dudley Weider at Dartmouth for surgery and tinnitus control; and William House in California, who gave us the All-Hear cochlear implant and for the development of an investigation device exemption for adaptation of the single-channel cochlear implant for tinnitus suppression. All collaborations have been coordinated by Barbara Goldstein.

The text *Tinnitus—Diagnosis and Treatment*, published by Lea & Febiger in 1991, provided an opportunity for us to share our clinical experiences with our colleagues. A second edition is now in preparation.

We in our group believe that we have just started our efforts for the benefit of the tinnitus patient. The future is bright for education, clinical research, and the establishment of increased accuracy for diagnosis and treatment for the symptom of tinnitus.

I am pleased that my medical school education and clinical practice experiences have allowed me to develop as a clinician, clinical researcher, and educator. Professor Claussen, members of the faculty of this Pre-congress session on tinnitus, and attendees, thank you again for the honor extended to me. I accept this honor on behalf of my family and coworkers.