



Provisional programme
**One-Day Workshop on Introduction to CBT for Tinnitus,
 Hyperacusis and Misophonia**

8 November 2023

Venue: Quality Airport Hotel Gardermoen, Jessheim, Norway

Course tutor: Dr Hashir Aazh, BSc, MSc, PhD

Time	Topic
	<i>“Synopsis”</i>
9:00-10:30	Introduction to the Cognitive Behavioural Therapy (CBT) for Tinnitus, Hyperacusis, and Misophonia <i>“Theoretical underpinnings, research evidence and practical implications.”</i>
10:30-11:00	Break
11:00- 13:00	Case Conceptualization (Formulation) And Treatment Plan <i>“By the end of this session, participants should be able to develop a CBT formulation explaining the development and maintenance of troublesome tinnitus or hyperacusis distress.”</i>
13:00-14:00	Lunch
14:00-15:00	Explore and Enhance Patient’s Motivation for CBT <i>“This practical session provides an opportunity for participants to practice principles of motivational interviewing (MI) in the context of tinnitus and hyperacusis rehabilitation. MI is “a collaborative conversation style for strengthening a person’s own motivation and commitment to change”</i>
15:00-15:30	Break
15:30-17:00	What to Expect From CBT: Reflections on Clinical Practice <i>“By the end of this session participants will be able to describe the expected outcomes for CBT focused on tinnitus, hyperacusis and misophonia. They should be able to predict the treatment success based on patient’s characteristics. The data for consecutive patients enrolled and completed CBT will be reviewed. Prior to start of the therapy, 65% of patients had at least one psychological symptom that met the “caseness” criteria of the UK mental health services. This reduced to 37% after the therapy. The mean Tinnitus Impact Questionnaire (TIQ), Hyperacusis Impact Questionnaire (HIQ), and Misophonia Impact Questionnaire (MIQ) reduced from 14.2 (SD=36), 12 (SD=9.2), 16 (SD=8.1), respectively, before treatment to 5.4 (SD=4.8), 4.5 (SD=5.2), and 8.3 (SD=7.2), respectively, after treatment. In this talk, we will explore the characteristics of patients who did not benefit from the treatment compared to those who did. For example, do patients who were receiving psychological/psychiatric care (medication or psychotherapy) in addition to their tinnitus/hyperacusis/misophonia-focused CBT show better outcomes compared to those who did not.”</i>