

Dear Colleagues,

This issue of the *Journal of Hearing Science* brings together papers on auditory science, clinical assessment, hearing screening, and cochlear implantation.

The issue opens with a hypothesis paper proposing middle ear muscle hyperactivity as a possible contributor to tinnitus and highlighting the potential role of middle ear mechanoreceptors. This conceptual contribution offers a fresh perspective on tinnitus mechanisms and may stimulate further experimental and clinical investigation.



The original articles span population-based and specialized clinical topics: booth-free audiometry in noisy environments, phonological influences on speech perception under multi-talker babble, and skill progression among novice auditory brainstem response (ABR) interpreters. The last of these touches on a problem the field has been slow to confront directly: hearing test results are not purely objective. ABR threshold estimation requires interpretive judgment, and that judgment is acquired unevenly, shaped by supervision quality, caseload exposure, and the presence or absence of structured feedback. Where training is informal or inconsistent, large diagnostic errors are to be expected rather than being exceptional. The deeper concern is inter-institutional variability: clinics differ substantially in how they train, supervise, and benchmark interpreters, yet these differences rarely surface in the literature or in accreditation standards. An erroneous estimate can misdirect a diagnostic pathway, delay intervention, or generate false reassurance. Reducing such errors requires not only better individual training but agreed-upon competency standards and external benchmarking. The field has yet to systematically develop such tools.

The issue closes with a comparative study of sacculo-collic function in children before and after cochlear implantation, adding to the literature on vestibular outcomes in pediatric implant recipients.

Together, these papers reflect the breadth of contemporary hearing science, connecting theory with advances in diagnosis, training, screening, and rehabilitations.

With kind regards and greetings,

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