

# Guest Editorial

## Unresolved Issues



**I**t is the last day of classes today at the University of Arizona, and one of the graduate students gave a 30-minute presentation about auditory steady-state response (ASSR) to our pediatric audiology class. She identified areas for further research based on her review of the published literature. Some of the issues she identified are addressed by research presented in this issue of *JAAA*. For example, evaluation of stimulus paradigms used for ASSR is addressed by John and colleagues. They present data that show the advantages (and some disadvantages) of a multiple-simultaneous stimulus paradigm. Another need is for more data concerning consistency of ASSR with other commonly used electrophysiologic tests. Van der Werff and colleagues compared ASSR thresholds with toneburst-evoked auditory brainstem response (ABR) thresholds in a group of children with hearing loss, while Cone-Wesson and colleagues show how a (screening) ASSR test

compares with other screening tools (ABR and evoked otoacoustic emissions) in newborns. Both of these studies show that ASSR compares favorably with more conventional measures and that there may be certain advantages to ASSR tests. Finally, there is a need for a larger database of ASSR findings in the pediatric population and some exposition of how the ASSR might be used in routine clinical assessment. Considering the results of Rance and Rickards, Van der Werff and colleagues, and Cone-Wesson and colleagues (both articles), findings from nearly 500 infants and young children are presented, thus contributing to this database.

Again, I thank all of the contributors to these issues and you, our readers, for your interest in the clinical research and applications of ASSR.

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*Guest Editor*