and giddiness. Effects also included blurred vision and visual field distortions in some exposure conditions. The nature and degree of all effects was dependent on both sound level and frequency with the most severe effects occurring in the audible frequency range (as opposed to infrasound), at levels above about 145 dB. The investigators found no temporary threshold shift (TTS) among their subjects, and the use of hearing protectors greatly alleviated the adverse effects.

Since the early days of jet-engine testing and maintenance, anecdotal evidence has appeared linking exposure to intense noise, with such complaints as dizziness, vertigo, nausea, and vomiting. As a result of siren noise at 140 dB, subjects consistently reported a feeling of being pushed sideways, usually away from the exposed ear, and one subject reported difficulty standing on one foot.

These effects were not as dramatic as from the jet-engine (broadband) noise at 140 dB. This research concludes that the threshold of labyrinthine dysfunction is about 135 to 140 dB and that these effects occur during, but not after, exposure.

### Time to Onset

No times to onset of nausea or nystagmus were identified in the literature but is presumed to be relatively immediate based on effects to the labyrinth system occurring during, but not after, exposure to sound pressure levels of 135 to 140 dB.

### **Duration of Effect**

The incapacitation lasts only as long as the incapacitating sound is present.

## Tunability

Based on the data presented above, it is unclear whether the degree of nausea or nystagmus is tunable, but similar symptoms caused by other stimuli are variable in degree.

#### Distribution of Human Sensitivities to Desired Effects

It is most probable that all individuals will be susceptible to this stimulus with the exception of those with a disease or defect (i.e., deaf mutes) of some part or parts of the vestibular system. Data showed no consistent decrease in vestibulo-ocular reflects with increased age.

# Recovery/Safety

Normal subjects are likely to recover immediately and experience no or unmeasurable changes in hearing unless well known frequency-intensity-time factors are exceeded. This is based on studies which found no temporary threshold shift in hearing of subjects tested at low frequency. Occupational safety personnel generally recognize that 115