



Randall K. Wenokur, M.D.

Lloyd C. Ford, M.D.

Benjamin M. Loos, M.D.

Joshua K. Au, M.D.

TINNITUS PATIENT INFORMATION SHEET

What is tinnitus?

Tinnitus is the medical term for the perception of sound in one or both ears or in the head when no external sound is present. It is often referred to as “ringing in the ears”, although some people hear hissing, roaring, whistling, chirping, or clicking. Tinnitus can be intermittent or constant with single or multiple tones – and its perceived volume can range from subtle to shattering. (American Tinnitus Association, 2006)

How common is tinnitus?

Tinnitus is an extremely common disorder (affecting 1 in 7 Americans). The range of impact may be anywhere from awareness of the noise in quiet to a life-impacting severe sound which is constantly present. (California Ear Institute, 2006)

What causes tinnitus?

- Tinnitus can be caused by prolonged exposure to loud noise (acoustic trauma). Exposure to loud noises can have a negative effect on your hearing and exacerbate tinnitus. Be sure to protect yourself with earplugs, earmuffs, or by simply not taking part in noisy events.
- Hearing loss that may accompany aging (presbycusis).
- A buildup of earwax.
- Medications, especially antibiotics or large amounts of aspirin. More than 200 medicines can cause tinnitus (NIDCD, 2006). The American Tinnitus Association (ATA) has compiled a list of medications that cause tinnitus. This listing is available by calling the ATA at (800)634-8978. Tell all of your physicians-not just your ENT doctor all about all prescription and over the counter drugs you are currently taking or have taken.
- Drinking an excessive amount of alcohol or caffeinated beverages.
- Ear infections or eardrum rupture.
- Dental or other problems affecting, such as temporomandibular (TM) problems.
- Injuries, such as whiplash or a direct blow to the ear or head.
- Injury to the inner ear following surgery or radiation therapy to the head or neck.
- A rapid change in environmental pressure(barotraumas).
- Severe weight loss from malnutrition or excessive dieting.
- Repeated exercise with neck in a hyper-extended position, such as when bicycle riding.
- Blood flow (vascular) problems, such as carotid atherosclerosis, AV malformations, and high blood pressure (hypertension).
- Nerve problems (neurologic disorders), such as multiple sclerosis or migraine headache.
- Other diseases. These may include: Acoustic Neuroma, Anemia, Labyrinthitis, Meniere’s disease, Otosclerosis, Thyroid disease.
- Finally stress and fatigue can affect your tinnitus. Make time to relax, and understand that life events can manifest themselves in your body in the form of increased tinnitus. Of course, this is easier said than done. Finding a good support network can help.

What can we do to manage tinnitus?

Though there is no cure for tinnitus, there are several treatments that may give you some relief. *"The American Tinnitus Association does not endorse or recommend any specific treatment strategy for tinnitus. Treatment, like causes of tinnitus, are varied, and what works for one does not work for all."*

Amplification (Hearing Aids)

Some tinnitus patients with hearing loss experience total or partial tinnitus relief while wearing hearing aids. There are many variables that determine success. However, if a patient has a hearing loss in the frequency range of the tinnitus, hearing aids may bring back in the ambient sounds that naturally cover the tinnitus.

Sound Therapy/Maskers

Various treatment strategies use sound to decrease the loudness or prominence of tinnitus. Sound therapies include both wearable (hearing aid-like devices) and non-wearable devices (such as table-top sound machines, radio, TV, or even a whirling fan). Often, sound is used to completely or partially cover the tinnitus. Some people refer to this covering of sound as masking. Sound therapies should always be combined with counseling.

Counseling

People with tinnitus may become depressed. Talking with a counselor or people in tinnitus support groups may be helpful.

Tinnitus Retraining Therapy

This treatment uses a combination of counseling and maskers. Otolaryngologists and audiologists help you learn how to deal with your tinnitus better. You may also use maskers to make your tinnitus less noticeable. After awhile, some people learn how to avoid thinking about their tinnitus. It takes time for this treatment to work, but it can be very helpful.

Relaxing

Learning how to relax is very helpful if the noise in your ears frustrates you. Stress makes tinnitus seem worse. By relaxing, you have a chance to rest and better deal with the sound.

(American Tinnitus Association, 2006, NIDCD, 2006)

Resources for Tinnitus Relief

American Tinnitus Association: <http://www.ata.org>

Medline Plus (Tinnitus): <http://www.nlm.nih.gov/medlineplus/tinnitus.html>

California Ear Institute: <http://www.californiaearinstitute.com>

National Institute on Deafness and Other Communication Disorders:

<http://www.nidcd.nih.gov/health/hearing/noiseinear.asp>

CSG Better Hearing: <http://www.betterhearing.com>