

## **Tinnitus**

### **Your Questions Answered**

## **Patient Information Leaflet**

#### What is Tinnitus?

Tinnitus is the sensation of sound in the ear or the head that is not caused by external noise. The sound is usually buzzing, humming, or ringing but can be of any nature.

It can affect one or both ears. It can be constant or may come and go. It may or may not be accompanied by hearing loss. It can occur at any age, even children but is more common among older people

Around 10% of the population experience tinnitus. For most, it is slight and barely disturbing but for approximately 1% of people, it interferes with their life so much that it affects concentration, work and sleep, and can cause considerable stress.

#### What causes Tinnitus?

Tinnitus is not a disease. It is a symptom of an underlying condition but is rarely linked to any serious problem. It may arise due to ear wax, ear infection, or disorders of the mechanism of the ear. Some medications may cause tinnitus, also physical distress or illness and emotional distress. Temporary tinnitus following exposure to loud music or noise is common. Prolonged exposure can result in permanent tinnitus. However it can be difficult to identify a cause in many cases.

#### What happens when I get Tinnitus?

The hearing pathway consists of 3 elements:

- The ear
- The auditory nerve
- The hearing part of the brain (auditory cortex)

Sound waves or vibrations are picked up by the outer ear, pass through the middle and inner ear where sound waves are changed into nerve signals. These signals are picked up by the auditory nerve and pass to the brain, where they are perceived as sound.

Activity of nerve endings in the ear cause constant sound emission. These sounds may be heard in a soundproof room but generally they are not heard because they are masked by outside sound. It is thought that tinnitus results from abnormal activity in nerve cells in the inner ear and auditory cortex.

When you become aware of tinnitus that means your filtering system does not block the tinnitus signal.

RVEEH, Tinnitus, 2013.

#### What happens when we experience tinnitus?

We hear the sound as being unpleasant and intrusive. We worry that it may be linked to a serious condition, or that it may cause deafness. We fear that nothing can be done with it and it may not go away.

Focusing on the noise leads to annoyance, frustration, and tension which in turn may contribute to tinnitus, setting up a vicious circle.

#### What is the treatment for Tinnitus?

The first stage is to attend your GP to rule out or to treat any cause such as ear wax or infection. If the tinnitus persists your doctor may request a clinic appointment with an Ear Nose and Throat specialist. Further tests may be required to make sure there is no underlying illness but, in most cases, no specific cause for tinnitus is found.

- While medication may be used for tinnitus, mostly for associated factors such as anxiety, there is no drug approved specifically for its treatment. Therefore treatment is focused on providing methods to manage tinnitus.
- Audiologists and hearing therapists can help in tinnitus management. Treatments include stress therapy, cognitive therapy and sound therapy.

RVEEH. Tinnitus, 2013.

- Tinnitus retraining therapy involves gradually teaching the auditory system to change the way we think about and react to tinnitus. This is available free of charge in many centres around the country.
- Encouragement and psychological support or counselling can help greatly in the early acute stage. Knowledge and understanding of the condition can reduce anxiety. Reducing the attention you pay to the noise can help to diminish it.
- In some cases a hearing aid may be of benefit where there is also a hearing deficit present.
- Sound machines that provide a steady background of comforting noise can be useful at night or in a quiet environment. Low-volume music, fans or even fish tanks can also be helpful. Nature sounds are available online.
- Tinnitus masking devices may help some, but not all people. These supply natural or artificial sound in order to suppress or mask tinnitus. Applications for iPod portable media players that offer a variety of masking sounds. A careful evaluation by an

audiologist will help decide whether a tinnitus masker will help you.

It is important to realise that, although there is no surgical procedure or wonder drug that can stop the noise, with time the great majority of people do learn to live with tinnitus and have a good quality of life in spite of it.

It can be reassuring that others who experience the same symptoms have reached a stage where their awareness of the noise is reduced to the point where they are no longer troubled by it.

#### **Self-help therapies for Tinnitus**

Over time, people learn that some things aggravate their tinnitus while other things help to soothe it. The following coping mechanisms are commonly used to help you move attention away from the noise.

- Avoid total silence as this causes the tinnitus to appear louder
- ➤ Have pleasant background sound around at a level lower than the sound of the noise to distract attention from it. Over a couple of months this helps to reduce the volume of tinnitus

- Avoid loud sounds and noisy places
- Where possible, try to avoid stressful situations
- Keep contact with people you enjoy being with
- Talk to someone about the noise (but don't bore them with it)
- Get sufficient rest, avoid becoming overtired
- Take regular reasonable exercise
- Develop some means of relaxation that suits you to help relax your emotional and nervous systems. Examples include breathing exercises, walking, yoga, massage, relaxing aromatherapy oils or listening to relaxation CDs
- Take note of anything that you think affects your tinnitus pattern, for example food or drink in your diet or the weather, and make adjustments to cope with this
- Become aware of negative thoughts and substitute them with pleasant ones

By implementing coping mechanisms the perception of the loudness of tinnitus will become less over a period of months. Your brain will gradually process the tinnitus as an ordinary sound so attention is not focused on it. Although the process takes months to achieve, as weeks pass the significance of the sound will diminish.

#### Sleep and Tinnitus

Difficulty in sleep is the most commonly reported problem by people with tinnitus. There are numerous strategies to help manage this problem, the aim being to establish a good sleep pattern.

#### Do's and Don'ts

- Do not watch TV in bed. Avoid reading books that stimulate thought.
- Put the lights out immediately you retire. If not asleep in 20 minutes, get out of bed and sit in another room until you are 'sleepy' again. Repeat this as often as possible.
- Set the alarm for the same time every day.
- Do not try too hard to fall asleep. Tell yourself that 'sleep will come when it is ready'.

- Try to keep your eyes open in a darkened room and as they naturally start to close tell yourself to resist for a few seconds. This 'tempts' sleep to come.
- Concentrate on breathing deeply and slowly.
   Tense and relax your muscles starting with your feet and moving up to your head. Repeat a neutral word e.g 'the' under your breath.
- Do not take recovery sleep to compensate for a previous bad night's sleep, follow this programme rigidly for several weeks to establish a good night's sleep pattern.
- Fit people sleep better. Exercise late in the afternoon or early evening, avoid exercise near bedtime
- Wind down during the second half of the evening, the body needs rest as well as sleep. Consider using a relaxation routine.
- Snacks before bedtime should be light and fluid intake restricted. Avoid coffee, tea and cola in the evening. Regular alcohol intake disturbs sleep. Hot milk is better. Stick to a routine. Avoid eating if awake in the middle of the night.

#### **Further help**

If you have been medically checked out for tinnitus and want further information or would like to join a support group you can contact the Irish Tinnitus Association

Irish Tinnitus Association - Helplines

- Dublin 018175700 Thursdays 10.00 12.00 www.irishtinnitus.ie
- Cork 0214505944 Wednesday 10.30 12.30 www.corktinnitus.com

British Tinnitus Association
http://www.tinnitus.org.uk/
www.deafhear.ie (Countrywide support groups)

http://www.asha.org/public/hearing/tinnitusmanagement/

http://www.ata.org/home

RVEEH, Tinnitus, 2013.

Ref No: PIL 044 Version: 1

We hope that this information is helpful to you. If anything is unclear or you have any other questions you would like to ask, then please do ask the nurse/doctor before the procedure.

# Royal Victoria Eye and Ear Hospital 01 6644600

#### **Revision History**

Ref No.	Version No.	Date Approved	Change	Section No.	Approved by
PIL044	1	2013	New Information Leaflet	-	HMG

Ref No: PIL 044 Version: 1