

What is Tinnitus?

Tinnitus is the name given to the condition of noises 'in the ears' and/or 'in the head' with no external source. Tinnitus noises are described variously as ringing, whistling, buzzing and humming.

The noise/s may be heard in one ear, both ears or in the middle of the head or it may be difficult to pinpoint its exact location. The noise may be low, medium or high-pitched. There may be a single noise or two or more components. The noise may be continuous or it may come and go.

What causes tinnitus?

Tinnitus is not a disease or an illness, it is a symptom generated within a person's own auditory pathways. Although it is often assumed that tinnitus occurs as a result of disease of the ears, this is often not the cause. The precise cause of tinnitus is still not fully understood but is usually associated with some hearing deficits.

Who gets tinnitus?

Experiences of tinnitus are very common in all age groups, especially following exposure to loud noise, however, it is unusual for it to be a major problem. There is a widely held misconception that tinnitus is confined to the elderly, but various studies have shown that it can occur at any age, even quite young children. Mild tinnitus is common - about 10 per cent of the population have it all the time and, in up to one per cent of adults, this may affect the quality of their life.

If you think you have tinnitus:

- ❖ See your doctor - Tinnitus is rarely an indication of a serious disorder, but it is wise to see your doctor if you think you might have it. Should something treatable be causing it, you might be referred to a specialist.

- ❖ Try not to worry - The noises may seem worse if you are anxious or stressed. When tinnitus starts, particularly if it's sudden, you may naturally be frightened and your concentration or your sleep may be disturbed. You may get angry and frustrated because no-one else understands, or you may live alone and not have anyone to talk to about it - that's where the BTA can help.

- ❖ Find out more - You will probably feel better when you find out more about the condition - that it's very common and you're not alone. Many people say that they notice tinnitus less when they are doing something. Keeping your mind occupied helps (but don't overdo things). If the noises seem louder at quiet times, particularly during the night, it may help to have soothing music or some other environmental or natural sound quietly on in the background. Practising relaxation and taking time out for yourself can also be a great help. If you would like to talk to someone about any problems you have, we can put you in touch with a support group near you. Many groups are run by people who are living with tinnitus - personal contact and shared experiences are very useful.

Managing your tinnitus

Whilst there is currently no known 'cure' for tinnitus, there are a range of strategies that can help to minimise the intrusiveness of the noises. People can and do manage the impact that tinnitus has on their lives. Here are some ideas.

Making the tinnitus less 'attention-grabbing'

Research shows that, whilst a large percentage of the population have tinnitus noises, only a small percentage are generally aware of or distressed by them. This is because people are often able to get used to the noises or 'habituate' to them - just as we can often get used to other noises around us (e.g. air conditioning or a clock ticking). In general, the noises we are most able to ignore are predictable, repetitive sounds that we perceive as non-threatening, uninteresting, and unimportant. Here are some ideas for starving tinnitus of attention:

Do:

- ❖ Notice in which environments and during which activities the tinnitus is less noticeable. Try to do more of the activities that help to shift your attention from the tinnitus (these will probably be activities you enjoy or are interested in). Expect the noises to be more noticeable in some environments (e.g. where there is less background noise). If possible, try to find ways of sometimes making these environments less 'tinnitus friendly' (e.g. occasionally introducing some low-level sound). Be cautious not to use at all times, as avoiding tinnitus entirely can increase the distress response to tinnitus.
- ❖ Take some time each day to practice switching your attention between the tinnitus noises and other bodily sensations. For example, close your eyes and take a couple of minutes to focus on the rhythm of your breathing, then switch your attention to your hands and mentally count your fingers, refocus on your breathing, switch to monitoring your tinnitus noises, then focus on your breathing again. Notice how you are able to control your attention.
- ❖ Practice slowing down your breathing and relaxing your muscles every day (perhaps try a warm bath, muscle relaxation exercises, or a massage).
- ❖ Tinnitus works a bit like an 'emotional barometer' - it is often more intrusive when there is stress or worry around. When you notice that the tinnitus is demanding your attention, ask yourself if there is anything else that is on your mind that you need to sort out. Having tinnitus does not make you immune to other worries and stresses - are you giving the tinnitus more credit for your stress than it deserves?

Do not:

- ❖ Feed the tinnitus by putting your life on hold while you chase a 'cure'. There is no proven cure for tinnitus at this time - when there is, you'll be sure to know about it! Remember, though, this does not mean you have to be controlled by tinnitus.
- ❖ 'Test' your tinnitus - e.g. listening out for whether you can hear the tinnitus over the TV or trying to figure out whether the noises you are concentrating on are the tinnitus or your masker. Each time you are 'listening out' for the tinnitus you are guiding your attention towards it.

Getting a decent night's sleep

Many people with tinnitus believe that the noises disrupt their sleep. If you have difficulty getting off to sleep it may be that the shift from a relatively noisy daytime environment to the quietness of the bedroom makes the tinnitus noises more noticeable - in the same way that a candle looks brightest in a dark room. Some people find that having some low-level sound in the bedroom (e.g. wave sounds, a fan or calming music) can help to mask the tinnitus noises. However, using sound that is too loud or attention-grabbing (e.g. rock music or listening to a talk programme on the radio) may get in the way of falling asleep.

Tinnitus - can my doctor treat it?

Tinnitus coming from any otologic cause associated with hearing loss can be very difficult to treat. The approaches are psychological in the form of counselling, understanding, and relaxation as well as coping strategies, medical in the form of drugs, and physical which usually involves the fitting of a hearing aid or noise generator to the affected ear. By hearing environmental sound better, or playing a noise into the ear, the tinnitus can be masked out, and is not noticed so much by daytime. Similarly, by having a background noise from a personal stereo, television, or clock radio in your bedroom, you can drift off to sleep with a noise distracting your brain from hearing the tinnitus.

There are surgical and medical approaches to tinnitus, and these are summarised below. As you will see, there is no perfect medication. In addition to the treatments mentioned here, there are numerous other drug therapies which have not been proven scientifically to have any value, such as calcium channel inhibitors (Nifedipine). Some patients have had benefit from acupuncture sessions, and this sort of complimentary therapy can provide relief, though not a cure.

Medications

Various drugs can be considered for treating chronic tinnitus. These include:

Gabapentin a drug which is used sometimes for epilepsy, and to reduce nerve pain and migraine headaches. The dose given for tinnitus is up to 900mg daily. As with all medications, there are certain side effects, which can include gastro-intestinal disturbances, dizziness, and drowsiness.

Sertraline a serotonin pre-uptake inhibitor (like Prozac) and is often used for depression. The initial dose is 25mg daily for the first week, then 50mg daily for the next few months.

The problem with this type of medication is that it can induce dependence, and it may be difficult to come off the drug in the future. It is generally well tolerated, however.

Psychological treatments for tinnitus

These include giving information and knowledge about tinnitus, discussing modulating factors in the lifestyle and diet, and working on coping strategies.

Surgical treatments for tinnitus

If the tinnitus is associated with conductive deafness, as in otosclerosis, surgery to improve hearing will usually reduce the tinnitus.

Decompression of the VIIIth nerve in the internal auditory canal can improve tinnitus, but it is an invasive intracranial procedure, and the tinnitus tends to return, as it occurs centrally in the brain; this surgery is not commonly undertaken, therefore.

As you will see from the above summary, there is still no easy way of treating intractable tinnitus. It is associated with severe hearing loss, and may in some cases be possible to mask the tinnitus out with a hearing aid or noise generator.