What is Tinnitus?

Living with Tinnitus through coping techniques, training and support.
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The noises may be heard as ringing, buzzing, whistling, roaring, rumbling, whining, clicking or other variations. One or both ears may be affected.

Tinnitus can result from a number of events and conditions. Exposure to loud noise is a common one; it can also be associated with ageing, head or ear surgery or certain drugs. In some people, tinnitus develops after a cold or flu, an ear infection or a period of severe stress. Temporary tinnitus following a night at a loud party or nightclub is common, but repeated exposure to loud noise and music can result in long-term ear damage, including permanent tinnitus. In some cases there is no known cause for tinnitus. Tinnitus is not a psychological illness, but it can cause psychological distress.

One or both ears can be affected. At the present time there is no cure but the condition can be managed.
The condition can have a serious effect on a person's quality of life, particularly in the period after the person is initially affected. Coping with tinnitus noises can be debilitating, leading to anxiety and depression; loss of interest in work, leisure activities and relationships.

Sleep may be disturbed and concentration affected. Little understanding by others of a condition that is not visible can increase a person's isolation. It is estimated that about 10% of people report persistent tinnitus, and about one in ten of these are significantly troubled by the tinnitus.

However, with time, the great majority of people do learn to live with tinnitus, and have a good quality of life in spite of it.
Management of Tinnitus

Since tinnitus may be caused by an underlying problem, the first thing you should do is make an appointment with your ENT to rule out any conditions.

There are a number of things you can do to manage your tinnitus. These are not a substitute for professional advice.

▶ If you are struggling to get to sleep, try listening to ambient sounds, for example, a relaxation CD. Radio and TV, on the other hand, can be thought-provoking and stop you relaxing.

▶ Avoid caffeinated or alcoholic drinks late at night as these can disturb your natural sleeping pattern.

▶ If your tinnitus is keeping you awake for long periods at night, try getting up, going to a different room and doing something distracting – such as making a warm milky drink, or having a warm bath.

▶ Stress can make tinnitus worse, so try to keep your stress and anxiety levels low through relaxation and exercise. Seeing a counsellor may also be helpful.

▶ Take a ‘holistic’ approach to your health – one that includes your whole person and lifestyle. Improving your general health, through better diet and more exercise, could also help with your tinnitus.

▶ If you enjoy going to clubs or concerts regularly, invest in a pair of good earplugs which lower volume without affecting sound quality.

▶ You could try a complementary therapy, such as acupuncture, homeopathy or reflexology. While research has shown that complementary therapy is unlikely to have a direct benefit on your tinnitus, it may help you manage your stress levels.

▶ Join a Tinnitus Support Group to meet people who will understand what you are going through – you can share tips and positive stories. Contact the tinnitus helpline on (01) 8175700 on Thursdays from 10.00am to 12.00pm for support and for details of your nearest group.
Tinnitus Retraining Therapy (TRT)

Retraining Therapy (TRT) is one of many approaches currently available for the treatment of tinnitus. The overall goal in TRT is for tinnitus to cease being an issue in the life of the individual.

- Tinnitus Retraining Therapy depends upon the natural ability of the brain to “habituate” a signal, to filter it out on a subconscious level so that it does not reach conscious perception.

- The signal of tinnitus has a great meaning to the tinnitus sufferer, and it is indeed, perceived as loud.

The entire thrust of TRT is

- (a) To remove the meaning from the signal and (b) To convert it from a loud sound to a soft sound - so that it can be naturally and effortlessly habituated.

- More specifically TRT is a method of retraining the brain to process the loud meaningful tinnitus signal as a signal that is not loud and not meaningful - so that the tinnitus can be naturally and effortlessly habituated.

Contact your nearest Chime Resource Centre for more information on Tinnitus Retraining Therapy.
Questions about Tinnitus

**Q. What is Tinnitus?**

Tinnitus is the term for noises which are heard “in the ears” or “in the head” – buzzing, ringing, whistling, hissing and other sounds which do not come from an external source. It is a very common symptom, affecting up to one in ten of the adult population. Children can also experience tinnitus, but fortunately it is rarely distressing to them. It can happen to those with average hearing as well as to deaf or hard of hearing people. It is also quite possible to have a very marked hearing loss without any tinnitus at all.

For many people with tinnitus, appropriate counselling, often combined with relaxation techniques, can be helpful in alleviating the fears and anxieties that people may have about their tinnitus. The worry that tinnitus may indicate serious disease, or advancing deafness, can usually be met with the reassurance that tinnitus is harmless and that the common, natural sequence is for people to get used to it so that, in time, it becomes much less noticeable and intrusive.

**Q. What Causes Tinnitus?**

There can be many causes but the two major ones are related to hearing disorders associated with ageing and exposure to loud noise. It can also develop following an emotional upset or an illness, injury or infection which may not be related to the hearing mechanism. It can also appear as a reaction to, or side effect of, a drug. Situations such as this can damage or over stimulate tiny hair cells in the inner ear, sending an irregular, unbalanced stream of nerve signals to the brain, which perceives it as tinnitus.

There are many other causes of tinnitus, a list of which can be seen below, but just because an individual experiences one of the following does not mean that they will have tinnitus:

Ageing, exposure to loud noise, wax, (rarely) ear tumours, certain drugs, ear infections, harsh syringing, jaw disorders, vascular abnormalities, high blood cholesterol, stress, illness, injury, catarrh, Meniere’s Disease, personal stereos and nightclubs, premenstrual tension, tobacco, alcohol, caffeine, some thyroid
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disorders, diabetes, allergies, dental procedures, arthritis, zinc deficiency, anaemia, labyrinthitis, colds and viral infections, migraine, hypertension, otosclerosis.

**Q. Is There a Cure?**

Occasionally the cause of tinnitus is treatable; for example, antibiotics can clear up an infection of the middle ear; wax can be removed from a blocked ear; minor surgery may eliminate some cases of tinnitus. Where there is permanent damage to the function of the inner ear hair cells, there is currently no wonder drug or operation which will immediately get rid of the tinnitus. There are, however, a number of ways to get significant relief from tinnitus, and it is nearly always possible with appropriate treatment to reduce the distress that tinnitus can cause.

**Q. Where Can I Get Expert Help and Advice?**

Your GP can carry out initial examination to check for wax, infection, and so on and may suggest ways of dealing with your tinnitus. If you'd like a further examination, he/she can refer you to a consultant, either through a local hospital's Ear, Nose and Throat (ENT) department, or privately.

**Q. What Help is Available from ENT Departments/Tinnitus Clinics?**

Many people will find a thorough consultation, examination and diagnosis from a specialist reassuring. The specialist may recommend and arrange treatment which could, depending on the cause, include:

- a hearing aid – even if there is only slight hearing loss, the use of a hearing aid may help mask tinnitus
- a tinnitus masker (sometimes called a white noise generator) – a device which looks like a hearing aid and generates a quiet, gentle sound of its own. This gives the ear something else to listen to and diverts the attention of the listener from the tinnitus so that it moves into the background. It may be used as part as retraining therapy, altering the brain's perception of tinnitus
- relaxation therapy – such as stress management and relaxation tapes
- counselling – an essential part of any successful
Questions about Tinnitus

• tinnitus management programme
  • medication for the effects of tinnitus – (e.g. anxiety, sleeping problems, depression)
  • surgery – for abnormalities in blood or muscles in or near the ear

Q. What Makes Tinnitus Worse?
Many people with tinnitus are not distressed by it – it is simply something which is there which does not affect their lives. Those who do become distressed generally find their tinnitus threatening in some way, seeing it (quite wrongly) as being caused by a serious disease, or a going on forever, getting louder and finally driving them mad. These beliefs may lead to magnifying their tinnitus.

Most people find that their tinnitus goes up and down – it may be aggravated by stress, loud noise, certain drugs (particularly aspirin and quinine) and excesses of, or reactions to, some foods and drinks (notably caffeine and alcohol), but it doesn't usually get worse with time alone.

Q. How can I Alleviate my Tinnitus?
It is important to remove its threatening qualities and this can often only be achieved by counselling from someone who really knows about tinnitus. Anxiety and tension can make tinnitus much worse, so learning how to relax is important – perhaps by joining a relaxation or yoga class and teaching yourself relaxation techniques. There are some CDs or tapes to choose from, depending on whether you want to listen to soothing music or prefer to be guided through easy-to-follow relaxation exercises. There is a strong link between tinnitus and stress. Muscle tension, anxiety and irritability that result from stress can make your tinnitus worse; this can in turn lead to an increase in stress – a vicious cycle. A range of tinnitus CDs and cassettes can help you break that cycle.

Q. How can I Cope With or Alleviate my Tinnitus and the Effects of it?
  • think positively
  • avoid stress
  • avoid loud noise exposure
  • keep occupied
• don't sleep during the day
• don't rush around unnecessarily
• try masking the sound
• don't drink too much alcohol
• try not to worry
• evaluate effects of foods and drinks on your tinnitus
• attend a self-help group
• try counselling
• talk to a friend
• develop a hobby.

**Q. Is There Anything Else I Can do?**
If you find that some things you eat or drink have an effect on your tinnitus, you could adjust your diet. You should wear proper ear protection – ear muffs or plugs, not cotton wool stuffed in the ears – in very noisy situations (for example, when using power tools or near noisy music, which can damage the ears and make tinnitus worse).

Having something else more pleasant and interesting to listen to, such as music, TV or radio can prove a valuable distraction to tinnitus and help 'mask' its noise. Many people with tinnitus say that it 'isn't there' when they're not listening to it – tinnitus is a very real noise but if you're not tuned to it, it can be much less of a problem.

**Q. Will 'Alternative' Treatments Help my Tinnitus?**
Some people with tinnitus have reported that acupuncture, hypnotherapy, homeopathy and other 'complementary' therapies have been of benefit. Although they probably have no direct effect on the ear, they may result in reduced tension, anxiety and depression and better sleep – which can have a secondary beneficial effect on the tinnitus. Most 'alternative' treatments are only available privately, but some maybe available through your local Health Board. Check with your GP for services in your area.

**Q. Does Tinnitus Affect Children?**
Although tinnitus occurs more in people in their middle or later years, it can affect younger people too, including children, who tend to complain much less about symptoms and to accept them more readily.
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With any ear problem, in children it is important to seek specialist help – symptoms can often be effectively treated.

Q. Does Tinnitus Cause Deafness?
Research indicates that tinnitus does not cause deafness, although they may both have the same cause, particularly noise damage to the ears. Tinnitus may affect your ability to concentrate, so you could 'miss' conversation. The needless fear that tinnitus does cause deafness can make tinnitus louder.

Q. What if I Can't sleep?
• Avoid late meals/indigestion
• Have a warm bath/hot drink
• Get up if not asleep within 15mins. Do something to relax, read.
• Return to bed. Repeat the process: if still unable to sleep, accept it and don’t fight it.
• Try masking/pillow speaker.
• Dr. Laurence McKenna’s leaflet “Goodnight – Sleep Tight” is available from The Irish Tinnitus Association.

About the Irish Tinnitus Association
The Irish Tinnitus Association aims to be a focal point for giving support and assistance to those who suffer from Tinnitus.

The Irish Tinnitus Association aims:
• to achieve our objectives through the dissemination of accurate information about the condition and the approaches which might be taken by sufferers to cope and hopefully gain some relief.
• to ensure that those with Tinnitus need not feel alone and this is particularly important in respect of the elderly and those who might live in isolated locations
• to raise public awareness of the condition and the extent to which it can be a disability
• to raise awareness with the medical profession, particularly GPs, to ensure that more guidance is given to patients than the current approach of ‘nothing can be done, you must live with it’.

Contact the Irish Tinnitus Association
35 N. Frederick Street, Dublin 1.

Phone: 01 8175700.
Fax: 01 8723816
Email: ita@chime.ie