

Tinnitus

Tinnitus (“TIN-a-tus” or “Tin-EYE-tus”) refers to “ringing in the ears” when no other sound is present. Besides ringing, tinnitus can sound like hissing, roaring, pulsing, whooshing, chirping, whistling, or clicking.

Tinnitus can occur in one ear or both ears. Below are some commonly asked questions about tinnitus:

Is tinnitus a common problem?

Yes. Almost everyone at one time or another has experienced periods of mild ringing or other sounds in the ear. Some people have more annoying and constant types of tinnitus. One third of all adults experience tinnitus at some time in their lives. About 10%–15% of adults have prolonged tinnitus requiring medical evaluation. The exact cause of tinnitus is often not known. One thing is certain: Tinnitus is not imaginary.

Is tinnitus a disease?

No. Just as fever or headache go together with many different illnesses, tinnitus is a symptom common to many problems. If you have tinnitus, chances are the cause will remain a mystery.

What causes tinnitus?

Conditions that might cause tinnitus include:

- Hearing loss
- Ménière’s disease
- Loud noise exposure
- Migraine headaches
- Head injury
- Drugs or medicines that are toxic to hearing (ototoxic)
- Anemia
- Hypertension
- Stress
- Too much wax in the ear
- Certain types of tumors

- Too much coffee
- Smoking cigarettes

Why is my tinnitus worse at night?

During the day, the distractions of activities and the sounds around you make your tinnitus less noticeable. When your surroundings are quiet, your tinnitus can seem louder and more bothersome. Fatigue and stress may also make your tinnitus worse.

How is the cause of tinnitus diagnosed?

Tinnitus is a symptom of a problem. The first thing you should do is to try to find out the underlying cause. You should have a medical examination with special attention given to conditions associated with tinnitus. You should also receive a full hearing evaluation by an audiologist to see if hearing loss may be causing your tinnitus.

Should I see an audiologist?

Your hearing should be tested by an audiologist certified by the American Speech-Language-Hearing Association (ASHA) to see if hearing loss is present. Since tinnitus can be associated with a number of hearing-related conditions, the hearing (audiologic) evaluation can help provide information about the cause and treatment options for you.

Can tinnitus actually be measured?

Tinnitus cannot be measured directly. The audiologist relies on information you provide in describing your tinnitus. The audiologist will ask you questions such as:

- Which ear is involved? Right ... left ... both?
- Is the ringing constant?
- Do you notice it more at certain times of the day or night?
- Can you describe the sound or the ringing?
- Does the sound have a pitch to it? High pitch ... low pitch?

-
- How loud does it seem? Does it seem loud or soft?
 - Does the sound change in volume or pitch over time?
 - Do you notice conditions that make the tinnitus worse—such as when drinking caffeinated beverages, when taking particular medicines, or after exposure to noise?
 - Does the tinnitus affect your sleep ... your work ... your ability to concentrate?
 - How annoying is it? Extremely so or not terribly bothersome?

In discussing your answers to these questions, the audiologist can give you information that will increase your understanding of your tinnitus.

Knowing more about the cause of your tinnitus can be a great relief. When the possible cause of your tinnitus is understood, your stress level (which can make tinnitus worse) is frequently reduced. You can “take charge” by anticipating, preventing, and changing situations that make your tinnitus worse.

How is tinnitus treated?

The most effective treatment for tinnitus is to eliminate the underlying cause. Tinnitus, in some cases, can be a symptom of a treatable medical condition. Unfortunately, in many cases, the cause of tinnitus cannot be identified, or medical or surgical treatment is not an option. In these cases, the tinnitus can still be managed using a variety of other methods. Be sure to discuss with your doctor any medical treatment options before considering tinnitus management.

Tinnitus management can include:

- Hearing aids
- Biofeedback
- Hypnosis
- Electrical stimulation
- Relaxation therapy
- Counseling
- Habituation therapies
- Tinnitus maskers
- Sound machines

Audiologists and otolaryngologists (ear, nose, and throat doctors, or ENTs) routinely collaborate in identifying the cause of tinnitus and providing treatment and management. A treatment that is useful and successful for one person may not be appropriate for another.

The American Tinnitus Association (www.ata.org) has information on various treatment options.

Will a hearing aid help my tinnitus?

If you have a hearing loss, there is a good chance that a hearing aid will both relieve your tinnitus and help you hear. Your ASHA-certified audiologist can assist with the selection, fitting, and purchase of the most appropriate hearing aids for you. Your audiologist will also help you learn how to get the best use out of your hearing aids.

What is a tinnitus masker?

Tinnitus maskers look like hearing aids and produce sounds that “mask,” or cover up, the tinnitus. The masking sound acts as a distracter and is usually more tolerable than the tinnitus.

The characteristics of the tinnitus (pitch, loudness, location, etc.) that you describe for the audiologist determine what kind of masking noise might bring relief. If you have a hearing loss as well as tinnitus, the masker and the hearing aid may operate together as one instrument.

Like all other treatments for tinnitus, maskers are useful for some but not all people. As with a hearing aid, a careful evaluation by an audiologist will help decide whether a tinnitus masker will help you.

Are there other devices that can help me?

Sound machines that provide a steady background of comforting noise can be useful at night or in a quiet environment. Fish tanks, fans, low-volume music, and indoor waterfalls can also be helpful. There are even applications for portable media players (iPod and MP3 players) that offer a variety of masking sounds that may reduce the annoyance of tinnitus.

Should I join a self-help group?

Tinnitus can be stressful because it can be difficult to describe, predict, and manage. Self-help groups are available in many communities for sharing information and coping strategies for living with tinnitus.

Often a self-help group promotes feelings of hope and control. Members of the group share strategies that they have found successful in dealing with their tinnitus. It can help to be reassured that you do not have a rare disease or serious brain disorder, or are not going deaf. With support, people with tinnitus usually find that they can cope with their tinnitus.

Your audiologist can connect you with a self-help group in your area. For additional information or help in finding a group near you, contact the American Tinnitus Association (www.ata.org).

NOTES:

For more information about hearing loss, hearing aids, or referral to an ASHA-certified audiologist, contact the:



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

2200 Research Boulevard
Rockville, MD 20850
800-638-8255

E-mail: actioncenter@asha.org
Website: www.asha.org

Compliments of

American Speech-Language-Hearing Association

2200 Research Boulevard, Rockville, MD 20850 • 800-638-8255

