Tinnitus

Summary

- Tinnitus is experienced as noises or ringing in your ears or head, when no such external physical noise is present.
- Tinnitus is a symptom of a problem in your auditory system.
- See your doctor if you think you have tinnitus.
- There is a variety of management techniques that may help relieve your symptoms.
- You can habituate or become used to tinnitus.
- Once you habituate your tinnitus it will no longer affect your life in any way.
- The key to habituation is no longer feeling threatened by your tinnitus.
- The more attention you pay to your tinnitus, the harder it is to become habituated to it.
- Free advice and counselling are offered by the Tinnitus Association of Victoria.

Tinnitus is a physical condition, experienced as noises or ringing in a person’s ears or head, when no such external physical noise is present. Tinnitus is not a disease in itself. It is a symptom of a fault in a person’s auditory (hearing) system, which includes the ears and the brain. The word ‘tinnitus’ is from the Latin for ‘tinkling or ringing like a bell’. Tinnitus does not have to dramatically affect your quality of life. Try to avoid focusing too much attention on your tinnitus and take steps to manage the condition. Avoid excessive noise, and find relaxation and stress management techniques that work for you. Approximately 17 to 20 per cent of Australians suffer from some degree of tinnitus, varying from mild to severe. The percentage of people who are severely affected is small. It is common for a person’s tinnitus to be affected by stress or tiredness, but this has no harmful significance.

Types of sounds experienced with tinnitus

Some of the most common sounds associated with tinnitus are:

- ringing
- buzzing
- whistling
- roaring
- humming.

Causes of tinnitus

The more common causes of tinnitus include:

- exposure to loud sounds
- extreme stress or trauma
- degeneration of the hair cells in the cochlea
- ear problems, such as otosclerosis (abnormal bone growth in the middle ear)
- Meniere's disease (swelling of a duct in the ear)
- some medications.

Preventing tinnitus

The two major preventable causes of tinnitus are:

- exposure to loud noise – for example, noisy lawnmowers or chainsaws. People at high risk include industrial workers, farmers and transport workers. Listening to loud music in cars, through headphones and at rock concerts can also be hazardous
- some prescription and non-prescription medications – always check with your doctor whether the medication
they are prescribing for you has a side effect of causing tinnitus or making it worse.

Some ways that you can prevent tinnitus include:

- use earplugs if you are going to be exposed to loud sounds over 85 decibels (dB)
- if you are listening to live music, don’t stand near the speakers
- if you listen to music through headphones, use noise-cancelling headphones, and keep the volume as low as you can (definitely lower than 80 per cent, and for less than 90 minutes per day)
- if you are in a noisy environment, take regular breaks away from the noise to give your ears a rest
- try to reduce your stress levels – sometimes tinnitus starts when you are anxious or stressed
- if you use earplugs or hearing aids, keep them clean, and avoid sticking things in your ears, such as cotton buds. These can all cause infections, which can cause tinnitus.

**Effects of tinnitus**

Tinnitus can be extremely debilitating in the early stages, and affect your ability to work or cope with normal life activities. People with tinnitus may suffer from:

- extreme distress (this is common)
- depression
- frequent mood swings, depression or anxiety attacks
- tension, irritability or frustration
- poor concentration
- sleep problems.

Thoughts of suicide are common when a person is in the early stages of tinnitus. If you are experiencing this level of distress, call [Lifeline](Tel. 13 11 14) or the [Suicide Call Back Service](Tel. 1300 659 467).

Remember that, in time, you can learn to manage your tinnitus and reduce the negative emotional effects it has on you.

**Early stages of tinnitus**

When you first learn you have tinnitus:

- consult your doctor, an audiologist (hearing scientist) or an ear, nose and throat specialist to check that you do not have an underlying medical condition
- learn all you can about tinnitus
- accept that you have tinnitus – once you have done this, you are halfway to mastering it
- understand that you may be depressed and tired in the early stages, but that this will pass as you learn to manage the condition.

**Reaction to noise and tinnitus**

When your mind first takes in a sound from the environment, it classifies it as threatening, neutral or non-threatening. The next time you hear the noise, your mind will automatically react. For instance, a car horn will usually make you more alert and ready to get out of the way of the car, even if you can’t actually see it.

When your mind first hears tinnitus, it cannot relate it to any previously classified noise and so will classify it as potentially threatening. This places the mind and body in a state of high anxiety. If your brain maintains the perception that tinnitus is threatening, you will become anxious every time you hear your tinnitus.

**Adapting to tinnitus**

The aim of adapting to tinnitus is to reach a point where you do not have a negative emotional reaction to it. This is known as habituation. Before starting to adapt to tinnitus it is important to have medical tests to make sure that your tinnitus is not caused by an underlying serious illness.

Habituation is like moving from the country to the city. At first, you notice the traffic noises, but after 12 months you...
are no longer aware of them. Understanding how your brain reacts to noise is the first step to being able to live with tinnitus.

Once you habituate:

- your tinnitus will have no negative emotional impact on you, so it will no longer unduly affect your life
- you will notice an improvement in your sleep, ability to concentrate, depression and anxiety
- you may still have some days where your tinnitus is more troublesome than usual, for example, when you are over-stressed or tired.

**Management of tinnitus**

Many people are wrongly told that nothing can be done about their tinnitus and that they will just have to learn to live with it. Although there is no cure for tinnitus, **you can learn to manage your tinnitus to the point where it is no longer a problem for you.**

People with tinnitus can continue to lead full and productive lives.

**Strategies for managing tinnitus**

The more attention you pay to your tinnitus, the harder it is to become used to it. Try to:

- overcome your fears of tinnitus
- change your perception of it from a sound to be feared to a benign sound that cannot harm you
- keep busy – focus on enjoyable and stimulating activities
- normalise your life as much as possible; do not let your tinnitus stop you doing the things you enjoy
- find a way to become habituated to it. The [4 Keys Program](https://www.betterhealth.vic.gov.au/toolkit.aspx?id=562) explains this process. A DVD is available to guide you through the steps to achieve habituation.

**Things to avoid to help manage tinnitus**

You can help to make tinnitus less distressing if you avoid:

- working through an endless range of cures (don't live in hope of a miracle cure)
- remaining angry about your tinnitus
- feeling guilty about not coping
- talking about it constantly with family and friends
- constantly monitoring the level of your tinnitus.

**Stress and tinnitus**

There is some evidence that stress makes tinnitus worse. Although stress is part of everyday life, you can take steps to reduce stress levels by using relaxation techniques. It will help if you:

- stay as calm as you can – becoming agitated about your tinnitus may make it worse
- develop techniques and activities that help you relax, such as meditation
- try to avoid stressful situations
- think positively – feeling negative and angry can aggravate the problem.

To reach habituation, you need to think of tinnitus as being non-threatening. If you continue to see your tinnitus as threatening, you will continue to feel anxious and stressed.

**Tinnitus and loud noise**

Loud noise will make tinnitus worse. To avoid further exposure to loud noise:

- wear ear protection such as earmuffs or earplugs for activities such as mowing the lawn, using a chainsaw or playing or listening to live music
- be aware of how loud is too loud – if you have to shout to make yourself heard when someone is standing about one metre from you, the noise level is too loud and will make your tinnitus worse

• if you use headphones to listen to music or other audio content, use noise cancelling headphones to block out background noise and enable you to keep the volume low. It’s recommended that you keep the volume to lower than 80 per cent, and limit your listening to no more than 90 minutes per day.

Hearing aids and tinnitus

If you have significant hearing loss good quality and properly fitting hearing aids can:

• reduce your perception of tinnitus by improving your hearing
• take away the strain of listening.

Medications to treat tinnitus

There are no specific medications for the treatment of tinnitus. Sedatives and some other medications may prove helpful in the early stages. However, medications without counselling are rarely effective. Complementary and alternative medicine and acupuncture only rarely seem to be helpful.

Surgery and tinnitus

Surgery for tinnitus is rarely justified and can make tinnitus worse.

Hypnotherapy and cognitive behaviour therapy for tinnitus

Hypnotherapy can indirectly help by aiding relaxation. Cognitive behaviour therapy, which is offered by clinical psychologists and is the basis of the Keys program, can help you to:

• change the way you think about tinnitus
• learn ways to focus your attention away from your tinnitus
• control the stress associated with tinnitus.

Lifestyle changes and tinnitus

Lifestyle changes that may help you manage tinnitus include:

• diet – some foods or drinks may have a temporary effect on tinnitus, but it is okay to eat and drink whatever you like in moderation. You may find certain foods give your tinnitus a temporary increase, but the effect is only short term
• quitting smoking – smoking narrows the blood vessels that supply vital oxygen to your ears and their sensory cells
• keeping physically and mentally active – take up exercise (walking is very beneficial), hobbies or interests. Even if your tinnitus prevents you from working, keep as physically and mentally active as possible. Do not withdraw from life
• finding the best ways to mask your tinnitus – try surrounding yourself with pleasant noise, for example, playing the radio softly, or listening to relaxation music, rain falling on the roof or the ocean surf.

Tinnitus and insomnia

True insomnia is defined as poor sleep followed by daytime fatigue. About half the people who experience distressing levels of tinnitus initially report some sleep disturbances. Different people need different amounts of sleep. The question is not how much sleep you have, but how you feel during the day.

The daytime effects of insomnia are the main problem. These effects can include:

• physical tiredness
• difficulty concentrating
• feeling depressed, irritable or lethargic.

It is important to put insomnia into perspective. One bad night’s sleep won’t really affect your performance the next day, although you may feel lethargic, irritable or moody.

Sleeping poorly for a week may make you feel really tired, but these effects disappear after one good night’s sleep.
Researchers have found no link between the loudness or pitch of sounds associated with tinnitus and the presence of sleep disturbances. Insomnia is linked to other factors that occur along with tinnitus, such as stress.

**Factors that contribute to insomnia for a person with tinnitus**

Sleep disturbance usually involves a combination of:

- health problems – for example, arthritis, migraines or asthma
- psychological factors – for example, stress or emotional crisis
- drug use – for example, alcohol or sleeping medication
- disturbing environments – for example, an uncomfortable bed or intrusive lighting
- conditioning – for example, the more you associate bed with struggling to get to sleep, the harder it is to relax there.

To successfully improve your sleep patterns, you will need to look at all the contributing factors.

Research has shown that relaxation techniques, such as yoga, meditation, biofeedback and progressive relaxation, can work well. Experiment and find the technique that works for you. You might like to try a regular relaxation class or use a self-help relaxation app.

It may also help if you:

- try and get up at the same time every day
- reserve your bed for sleeping – avoid arguments or serious discussions in bed
- avoid naps during the day
- experiment with low-intensity background noises in the bedroom, for example, leave the radio playing softly or play tape recordings of ocean surf.

When you go to bed for the night, if you are not as sleepy after half an hour, get up and go into another room. Do something that engages your brain (this does not mean watching TV). Write a list of things to do, plan a holiday or write a letter or email. After about 20 minutes you will be able to go back to bed and go to sleep. The same applies if you wake up in the night.

Remember, don’t go to bed if you don’t feel sleepy. Do something quiet and relaxing until you do feel sleepy.

It may help you to sleep if you avoid eating heavy meals just before bedtime. It is also a good idea to reduce your late afternoon and evening consumption of:

- alcohol
- chocolate
- tea, coffee and caffeinated soft drinks
- cigarettes.

Regular exercise helps you to cope better with stress and reduce fatigue, both of which can make sleeping more difficult or disturbed.

**Medical advice for insomnia and tinnitus**

If you have any physical problems that contribute to your sleep disturbance, seek medical advice. If your sleep problems persist, don’t try to put up with them – seek professional help.

**Tinnitus ‘cures’**

Most of the so-called tinnitus ‘cures’ on the market have no scientific basis. If you have a query about a specific treatment, ask your doctor or contact the Tinnitus Association of Victoria for more information.

**Where to get help**

- Your **GP (doctor)**
- **Tinnitus Association of Victoria** Tel. (0400 554 046)

betterhealth.vic.gov.au