

## What Is Tinnitus?

The presence of head noise, or tinnitus (pronounced correctly as either “tin-*nigh*-us” or *tin*-nit-us”), is a very common and annoying occurrence. It may be intermittent or constant in character, mild or severe in intensity, and vary from a low roar to a high-pitched type of sound. Tinnitus is a subjective experience: one hears sound when there is no external physical sound present. People describe it as ringing, hissing, roaring, chirping, pulsing, clicking, buzzing, or gurgling. It may or may not be associated with hearing impairment.

Tinnitus is a symptom and not a disease, just as pain in the arm is a symptom and not a disease. It is estimated that 50 million American adults have tinnitus to some degree. Of those, 12 million have it severely enough to seek medical help.

When tinnitus is severe, it can cause loss of concentration, sleep problems, and psychological distress. It can also make a fluctuating or deteriorating hearing condition from Ménière’s Disease or other vestibular (balance) disorders seem worse. **Tinnitus is one of the four classic symptoms of Ménière’s Disease.** The other symptoms are vertigo, hearing loss, and pressure in the ears. Tinnitus does NOT cause hearing loss.

It is important to see an otolaryngologist to investigate the cause of tinnitus, and to determine if there is a treatable medical condition causing the tinnitus.

## What Causes Tinnitus?

The actual mechanism responsible for tinnitus is not yet known. It is a real -- not imagined -- symptom of something wrong in the auditory or neural system.

There are many causes including excess ear wax, ear infections, acoustic tumors, exposure to loud sound, head injury, disorders of the neck vertebrae or temporomandibular (jaw) joint, age, cardiovascular disease, allergies, under active thyroid, degeneration of the bones in the middle ear, some 200 prescription and non-prescription drugs (including aspirin) that are ototoxic, and **Ménière’s Disease.**

Most tinnitus comes from damage to the cilia or microscopic endings of the hearing nerve in the inner ear. The health of these nerve endings is important for acute hearing, and injury to them causes hearing loss and often tinnitus.

Researchers suspect at least some types of tinnitus originate in the brain. The increased damage to the cilia or auditory nerve compounds the intensity of tinnitus. People who are completely deaf may still hear these illusory sounds, similar to the phantom limb pains that develop following amputation. The brain is trying unsuccessfully to make sense of the faulty information that it receives via damaged hearing cells in the inner ear or along the auditory (hearing) nerve. It is thought that perhaps the brain is generating its own

“noise” to compensate for the lost or distorted sound it is receiving.

This does not mean that sufferers have brain damage or are in any way insane. The brain is simply its own victim of misunderstanding.

## What Makes Tinnitus Worse?

**Safeguarding your hearing is of utmost importance.** Avoid the following:

1. Loud noise – use hearing protection with power tools, guns, motorcycles, vacuum cleaners, loud music, etc.
2. Excessive use of alcohol or recreational drugs can exacerbate tinnitus.
3. Caffeine, found in coffee, tea, chocolate, cola drinks
4. Nicotine, found in tobacco products, has vascular effects associated with an increase in tinnitus.
5. Salt – salt impairs blood circulation.
6. Fatigue and sleep deprivation
7. Medications – Aspirin, Quinine, some antibiotics, and many other drugs are causative tinnitus agents. The physician should always be informed of drug and dosage if tinnitus is experienced.
8. Stress – Many people notice reduction in their tinnitus volume when they are able to control their stress levels. Worrying about the noise only focuses on the annoyance and increases awareness of its presence.

## What Treatment Is Available?

Hearing aids can help reduce tinnitus by allowing the patient to hear ambient environmental noises instead of the tinnitus.

Masking devices, white noise machines, fans, a radio playing quietly, or soft music may also be perceived as a more pleasant sound than the internal tinnitus sound.

Tinnitus Retraining Therapy (TRT) is designed to retrain the brain to ignore the tinnitus. TRT combines counseling and exposure to constant low-level sounds. (This treatment is not usually successful with Ménière's.)

Drug therapy including tranquilizers, anti-anxiety medications, vasodilators, and antihistamines help some people.

Biofeedback is a relaxation process in which one learns to control his physiological reaction to stress. Since stress seems to worsen tinnitus, gaining control over one's reaction to it often helps minimize the tinnitus.

Dental treatment for temporomandibular joint problems (TMJ) is effective for some.

Counseling, cognitive therapy, behavioral modeling, patient education, and support groups have proven useful for many.

Cochlear implants for those with profound hearing loss sometimes give post-operative improvement for tinnitus.

Other options may include control of allergies, acupuncture, hypnosis, chiropractic care, cranio-sacral therapy, and naturopathic treatments.

## Coping With Tinnitus

Keep a tinnitus diary listing the activities that seem to make the head noise better or worse.

Learn to relax. Will this make tinnitus go away? No. But it can ease stress, improve sleep, and help manage other symptoms of Ménière's Disease.

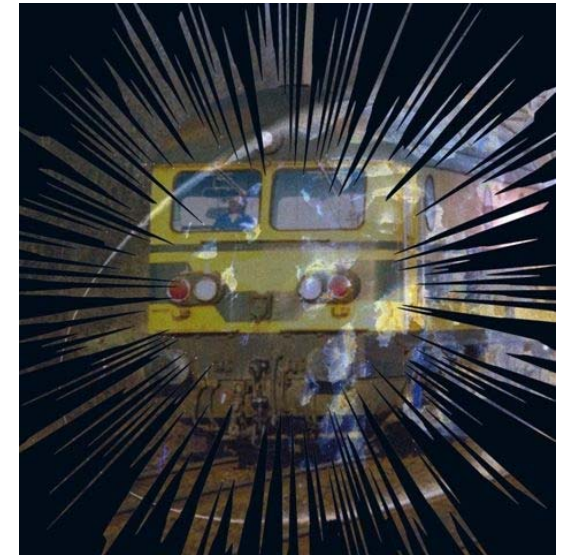
Deep, abdominal breathing is a natural relaxant. Lead with the waist and breathe in to the count of eight, hold for the count of four, exhale slowly. Repeat five times. Exercise several times a week. Walking is very helpful. If balance is poor, take a buddy or use a cane or walker. Exercise will make one feel stronger and helps work off aggressions and anxiety.

Sleep well. Avoid caffeine. Maintain a regular bedtime routine. Keep the room temperature cool and keep a good supportive mattress. Try a fan or white noise machine to muffle the tinnitus.

**Protect your ears.** Wear earplugs, wear earmuffs, or avoid noisy situations.

Visit the Meniere's Resources, Inc. website [www.menieresresources.org](http://www.menieresresources.org) for more information, personal stories, coping resources, and to become a member or make a donation.

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Art by Danny Pancy

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What is it and what can be done for it?

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