



EAR, NOSE, & THROAT CENTER OF THE OZARKS

Tinnitus (Ringing in the Ears)

What is tinnitus?

Tinnitus (“TIN-a-tus” or “Tin-EYE-tus”) is the perception of sound in the head or ears when no outside sound is actually present. It is often referred to as “ringing in the ears,” yet other forms of sound such as roaring, hissing, chirping (crickets), whistling, swishing, or clicking noises have also been described. Tinnitus can occur in one or both ears and can fluctuate in severity and character.

Is tinnitus a disease?

No. Just as fever or headache can accompany various diseases, tinnitus is a symptom common to many problems, both physiological and psychological.

What causes tinnitus?

Often the definite cause of tinnitus can remain a mystery. Commonly, tinnitus can be the side effect of damage or wear and tear that has built up in the innermost portion of the ear (cochlea), however the exact origins of this can be difficult to identify with certainty. When the inner ear or hearing nerve sustains damage, spontaneous unchecked nerve impulses can discharge up the nerve pathway to the part of the brain that detects sound. This can result in the perception of ringing (tinnitus). High blood pressure, noise exposure, specific medications, infection, ear wax build-up, and certain types of tumors are examples of other conditions that might cause tinnitus.

Why is my tinnitus worse at night?

Some people find that the distraction of activities and daytime background noise make tinnitus less obvious. When your surroundings are quiet, your tinnitus may seem more constant and louder. Fatigue at the end of the day may make your tinnitus worse.

What should I do about my tinnitus?

Since tinnitus is a symptom, the first step should be a medical evaluation including a hearing test. Several factors are known to influence tinnitus, some of these may be a

cause of tinnitus while others seem only to be factors that make it more severe. Examples of these factors include the following:

- High blood pressure
- Anxiety/stress
- Poor sleep
- Caffeine intake
- Certain medications (aspirin, diuretics)
- Tobacco
- Noise exposure

Identifying and eliminating/minimizing these factors is important in managing tinnitus. In reality, there is not a simple cure for the vast majority of cases of tinnitus. For some people psychiatric consultation and/or treatment of anxiety is helpful if tinnitus results in extreme distress and dramatically poor quality of life. Biofeedback/behavioral therapy and vitamin/mineral supplements are examples of other treatments that have been used to manage tinnitus with variable success rates.

Another technique used by many people to cope with tinnitus is called masking. Masking is the use of external sounds to mask or “cover up” tinnitus. Most often, this technique is used at night to improve rest/sleep. White noise (static of an untuned radio), music, or water noise from a small bedside fountain are examples of masking techniques that are commonly used.

The American Tinnitus Association webpage (www.ata.org) is an excellent resource for understanding tinnitus and the treatment options available.

Will a hearing aid help my tinnitus?

If you have hearing loss severe enough to require the use of hearing aids, there is a good chance that they will help your tinnitus. Although it is not generally recommended to acquire hearing aids if tinnitus is the only reason for doing so, this secondary benefit should be considered when deciding whether hearing aids are a good idea for you. A physician or audiologist can help determine if you would be a good candidate for hearing aid use.