



Audiology

Patient Information Leaflet (PL)

Tinnitus



As a teaching hospital, we conduct education and research to improve healthcare for our patients. During your visit students may be involved in your care, or you may be asked to participate in a clinical trial. Please speak to your doctor or nurse if you have any concerns.

Chief Executive: Professor Joe Harrison Chair: Alison Davis

What is Tinnitus?

Tinnitus is the term for noises heard 'in the ear or ears' or 'in the head' when no obvious source of sound is apparent. The noises are usually described as ringing, whistling, hissing, buzzing or humming. Tinnitus is very common in people of all ages. It is important to realise that tinnitus is not a disease but a symptom and is rarely linked to any serious problem. Your ENT consultation is designed to ensure that there is no underlying condition causing your tinnitus.

Tinnitus switches on for a variety of reasons. We know it can be linked to exposure to loud noise, hearing loss, ear or head injuries, some diseases of the ear, or the side effects of some medication.

Some people notice tinnitus after an emotional experience or lifestyle change. You can also have tinnitus without experiencing any of the above. The severity of the tinnitus may be determined by your reaction to the noise, for example if you feel your tinnitus is threatening you may find yourself unable to do anything but listen to it. This is part of the primitive survival mechanism we all possess, where senses are primed, and the hearing pathways placed on full alert.

Fortunately, you will gradually lose your fear of the tinnitus and begin to cope better with it. You may have noticed that in your everyday life you block out unwanted or non-threatening sound, for example a ticking clock or traffic noise, yet you react to other sounds, such as a key in the lock, or your name called across a noisy room. This same process (called 'habituation') can also happen with the tinnitus, and you will be able to stop 'listening in' to it.

Management and help

Using sound: You can take simple measures to help the symptoms by avoiding silence, for example always keep the radio on low. Even a fan or radio on quietly with a speaker under your pillow may be sufficient to allow you to get to sleep. If you have a hearing loss (even a mild one), a hearing aid may help you manage the tinnitus. Otherwise, a Wearable Sound Generator may be of benefit. This looks like a hearing aid but instead of amplifying sounds it feeds a gentle constant 'shushing' into the ear. Anxiety and tiredness aggravate tinnitus; learning to relax can be helpful.

Drugs: There are no drugs to treat tinnitus at present. If you would like to discuss your tinnitus further – request an appointment with a Specialist Audiologist by asking the ENT Doctor who has seen, you to refer you.

For further information:

British Tinnitus Association, Ground Floor, Unit 5, Acorn Business Park, Woodseats Close, Sheffield, S8 0TB Minicom 0114 258 5694 E

Mail info@tinnitus.org.uk

Website: <u>www.tinnitus.org.uk</u>

BTA Tinnitus Helpline: 0800 018 0527 / <u>helpline@tinnitus.org.uk</u> (Mon –Fri 9am – 5pm)

Action on Hearing Loss (AOHL)

http://www.actiononhearingloss.org.uk/your-hearing/tinnitus Tel: 0808 808 0123 AOHL Tinnitus helpline: 0808 808 6666

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