

ABOUT TINNITUS

“Tinnitus is the medical term for the perception of sound in one or both ears or in the head when no external sound is present.” – American Tinnitus Association

Tinnitus can be intermittent or it can be continuous. When tinnitus is continuous it often creates great distress in the sufferer.

Tinnitus is not a disease but a symptom

It can be caused by:

- Ear infections, foreign objects or wax in the ear, or, excessive exposure to loud sounds, medications such as aspirin or some antibiotics

Some underlying medical conditions which have been reported to cause tinnitus are:

- Meniere's disease, diabetes, hypertension, TMJ, vascular, drug induced, ear disease, tumors, cardiovascular disease, hearing loss and post surgical

Some of the non-medical underlying conditions reported are:

- Noise induced, head trauma, barotraumas, stress induced, whiplash and substance induced such as alcohol, nicotine or food

Tinnitus and hearing loss

Even though there is no correlation between tinnitus and hearing loss, many people with tinnitus have hearing loss. They often identify their tinnitus pitch in the pitch range of their hearing loss.

Because tinnitus is often defined as a subjective phenomenon, it is difficult to measure tinnitus using objective tests. However, comparing tinnitus to a sound generated by an audiometer allows the examiner a method of identifying the pitch and intensity of the tinnitus. Severity of the tinnitus is often rated clinically on a simple scale or by filling out a tinnitus handicap questionnaire. Subjectively, the degree of severity of tinnitus can also be linked to the practical difficulties it imposes on the way of life, such as interference with sleep, quiet activities, work and social interaction.

Tinnitus is common

- Tinnitus affects 10-17% of the general population (45-50million Americans)
- Tinnitus affects 30% of the elderly over 65 years of age
- For about 5% of the general population, prolonged spontaneous tinnitus (about 13 million Americans) is moderately or significantly annoying, causing them to seek help
- 1 out of 100 adults reports tinnitus as a debilitating problem (about 2.6 million Americans)

There's help

An audiologist who specializes in tinnitus obtains specific education and training in providing tinnitus and decreased sound tolerance evaluations, treatment and/or management.

The goals of the audiologist will be:

- To establish an accurate tinnitus diagnosis, maintain hearing and communication abilities
- To exclude medical disorders of the ear and hearing
- To provide comprehensive hearing and tinnitus rehabilitative services

What to expect

1. Comprehensive audiological assessment (45 minutes)

The first step is a thorough audiological assessment prior to the tinnitus evaluation. Medical referrals will be given if necessary.

2. Tinnitus evaluation and counseling (90 minutes total)

At the evaluation our goal is to determine the extent of the problem in three specific areas.

- 1) Reaction to tinnitus
- 2) Hearing sensitivity
- 3) Sound tolerance

The tinnitus practitioner will use a series of subjective and objective measurements to develop a comprehensive individualized treatment and/or referral plan. Measurements include the following:

- Self-administered questionnaires and handicap inventories
- Case history, interview and review of self-administered questionnaires
- Assessment including tinnitus and sound tolerance testing

The audiologist will now discuss the results of the testing with the patient, including:

- Review of subjective measurements (questionnaires, case history, inventories)
- Review of objective measurements (hearing, tinnitus and sound tolerance evaluations)
- Educational tinnitus counseling based on individualized correlation of subjective and objective measurements

3. Consultation with recommendations (45minutes)

The audiologist will consider all the information gathered about the tinnitus and the problems associated with the tinnitus to develop an individualized treatment plan. The plan will include:

- Presentation of individualized treatment/management plan
- Instrumentation, if indicated
- Appropriate professional referrals
- Follow-up schedule
- Cooperative agreement to the treatment plan including realistic expectations

Instruments to assist people with Tinnitus

- Sound generators
- Combination hearing and tinnitus devices
- Assistive sound therapy devices

Currently no cure for tinnitus

At this time, there is no cure for tinnitus. But there is definitely much that can be done to reduce the perception of tinnitus and manage the negative effects it often has on a person's life.

For more information

www.ata.org or www.landmarkhearing.com

