

Tinnitus - Ringing in the ears

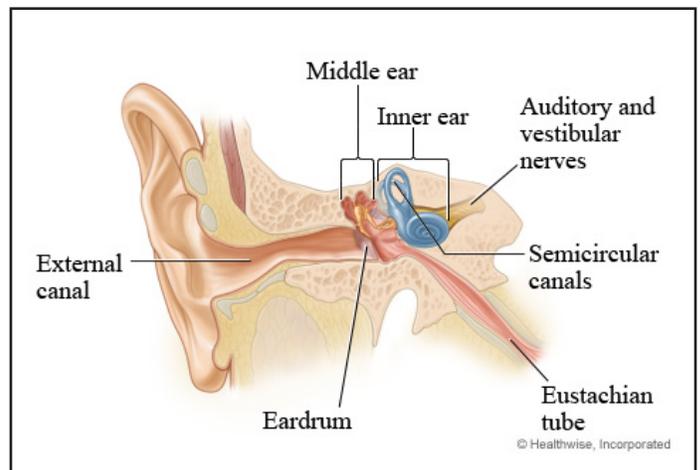
Many people experience an occasional ringing (or roaring, hissing, buzzing, or tinkling) in their ears. The sound usually lasts only a few minutes. Ringing in the ears that does not get better or go away is called tinnitus. You may hear a sound that do not come from your surroundings. The sound may keep time with your heartbeat, it may keep pace with your breathing, it may be constant, or it may come and go. Tinnitus is most common in people older than age 40.

There are two main types of tinnitus.

- Pulsatile (like a heartbeat) tinnitus is often caused by sounds created by muscle movements near the ear, changes in the ear canal, or blood flow (vascular) problems in the face or neck. You may hear sounds such as your own pulse or the contractions of your muscles.
- Nonpulsatile tinnitus is caused by problems in the nerves involved with hearing. You may hear sounds in one or both ears. Sometimes this type of tinnitus is described as coming from inside the head.

The most common cause of tinnitus is hearing loss that occurs with aging (presbycusis), but it can also be caused by living or working around loud noises (acoustic trauma). Tinnitus can occur with all types of hearing loss and may be a symptom of almost any ear disorder. Other possible causes of tinnitus include:

- A buildup of earwax.
- Medicines, especially antibiotics or large amounts of aspirin.
- Drinking an excessive amount of alcohol or caffeinated beverages.
- Ear infections or eardrum rupture.
- Dental or other problems affecting the mouth.
- Injuries, such as whiplash or a direct blow to the ear or head.
- Injury to the inner ear following surgery or radiation therapy to the head or neck.
- A rapid change in environmental pressure.
- Severe weight loss from malnutrition or excessive dieting.
- Blood flow (vascular) problems, such as carotid atherosclerosis, arteriovenous (AV) malformations, and high blood pressure (hypertension).
- Nerve problems (neurologic disorders), such as multiple sclerosis or migraine headache.
- Diseases (Acoustic neuroma, Anemia, Labyrinthitis, Ménière's disease, Otosclerosis, or Thyroid disease).



Most tinnitus that comes and goes does not require medical treatment. You may need to see your doctor if tinnitus occurs with other symptoms, does not get better or go away, or is in only one ear. There may not be a cure for tinnitus, but your doctor can help you learn how to live with the problem and make sure a more serious problem is not causing your symptoms.

The following tips may help you reduce symptoms of tinnitus.

- Cut back on or stop drinking alcohol and beverages containing caffeine.
- Stop smoking and stop using smokeless tobacco products. Nicotine use makes tinnitus worse by reducing blood flow to the structures of the ear.
- Limit your use of aspirin, products containing aspirin, and other nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen or naproxen.
- Exercise regularly. Exercise improves blood flow to the structures of the ear. But avoid extended periods of exercise, such as bicycle riding, that keep your neck in a hyperextended position.

Try these methods to cope with the constant noise:

- Limit or avoid exposure to the noises you suspect are causing your tinnitus. If you cannot avoid loud noises, wear protective earplugs or earmuffs.
- Try to ignore the sound by directing your attention to other things.
- Practice relaxation techniques, such as biofeedback, meditation, or yoga. Stress and fatigue seem to make tinnitus worse.
- Quiet rooms can cause tinnitus to seem more distracting. Background noise may reduce the amount of noise you hear. Play music or white noise when you are trying to fall asleep or anytime you find yourself in a quiet place. Try using a fan, a humidifier, or a machine that makes soothing sounds such as ocean waves.