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## Understanding tinnitus

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**Action on Hearing Loss**

[actiononhearingloss.org.uk](http://actiononhearingloss.org.uk)



**NATIONAL  
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“After a busy, stressful month at work seven years ago, I developed loud ringing in my ears. I was terrified, but my GP reassured me and referred me to audiology; I was diagnosed with tinnitus and mild hearing loss.

I manage my tinnitus by listening to distracting noises, controlling my anxiety, exercising regularly – and getting enough sleep! My GP referred me for cognitive behavioural therapy (CBT), which was tremendous – it taught me new ways to control my anxiety.

I enjoy watching noisy, action-based films to take my mind off my tinnitus, and when I’m in the garden I put on the pond waterfall. I’m utterly addicted to audio books – I fall asleep listening to them and they give me enormous relief. Everyone’s different, but there will be a management strategy that works for you.”

**Bev Frowen, Rhonnda Cynon Taf**

**You'll find this leaflet helpful if you want to know more about tinnitus. We explain what tinnitus is, what causes it, what you can do to help yourself manage it, and what help is available from healthcare professionals.**

## **Contents**

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- **What is tinnitus? page 5**
- **What does tinnitus sound like? page 5**
- **Who gets tinnitus? page 6**
- **How does tinnitus affect people? page 6**
- **What causes tinnitus? page 7**
- **What's the link between stress and tinnitus? page 9**
- **Is there a cure for tinnitus? page 10**
- **I think I have tinnitus – what should I do? page 10**
- **What will happen when I'm referred? page 11**
- **What can help me manage my tinnitus? page 12**
- **Why do I feel sensitive to sound? page 18**
- **What tinnitus research does Action on Hearing Loss fund? page 19**
- **Where can I get more information and support? page 20**

**Please let our Information Line know if you'd like this leaflet in standard print, braille or audio (see page 20 for contact details).**

## **Medical disclaimer**

The information in this leaflet is not medical advice and, by providing it, neither Action on Hearing Loss nor our tinnitus and medical advisers undertake any responsibility for your medical care, or accept you as a patient. Before acting on any of the information contained in this leaflet, or deciding on a course of treatment, you should discuss the matter with your GP (family doctor) or other medical professional who is treating you.

## What is tinnitus?

Tinnitus is a common medical symptom. It's the experience of hearing sound in your ears or head when there's nothing outside your body that's making that sound. It can be temporary or permanent.

## What does tinnitus sound like?

People experience tinnitus in different ways. Most people describe it as 'ringing in the ears', but some people hear other sounds, including:

- hissing
- sizzling
- buzzing.

There may be a single sound or two or more, and the sound may be low, medium or high-pitched. It may be there all the time, or come and go.

For a small number of people, tinnitus is a rhythmical noise that may beat in time with the heart. This is called 'pulsatile tinnitus'.

Occasionally, tinnitus can sound like fragments of tunes or songs. This is known as 'musical hallucinations'.

**More information:** To find out more about these rare forms of tinnitus, see our factsheets **Pulsatile tinnitus** and **Musical hallucinations**.

## Who gets tinnitus?

Around 1 in 10 adults in the UK have tinnitus. Many people get tinnitus for a short time – for example, after being exposed to loud music, or when they have congestion because of a cold. But for some people, it doesn't go away.

People of all ages get tinnitus, even children. But it's more common in older adults.

## How does tinnitus affect people?

Tinnitus affects people in different ways. Most people who have tinnitus aren't troubled by it or may find it only mildly annoying. But some people find that tinnitus has a serious impact on their quality of life, causing:

- distress
- sleep difficulties
- negative effects on hearing
- general anxiety.

How loud tinnitus is, or what it sounds like, doesn't seem to make a difference to whether it troubles people or not.

The good news is that most people find that their tinnitus slowly gets better over time. This is because the brain gradually learns to 'filter out' tinnitus and not pay attention to it. The process is called 'habituation' – it's the main goal of tinnitus therapies (see 'What can help me manage my tinnitus?', **page 12**).

## What causes tinnitus?

Most cases of tinnitus are linked to hearing loss caused by damage to the inner ear, such as through normal ageing or exposure to loud noise. This type of hearing loss is called **sensorineural**.

Less commonly, tinnitus is linked to hearing loss caused by a blockage or ear condition that affects the outer or middle ear and stops sound waves from passing into the inner ear. This type of hearing loss is called **conductive**.

Ear-related conditions that can be associated with tinnitus include:

- a build-up of ear wax
- a perforated (torn) eardrum
- ear infections such as glue ear
- otosclerosis
- Ménière's disease
- neurological disorders including acoustic neuroma, which is a non-cancerous growth that affects the hearing nerve.

Sometimes, but uncommonly, tinnitus can be linked to other medical conditions:

- head or neck injuries
- cardiovascular disorders, especially high blood pressure
- metabolic disorders including hypothyroidism and diabetes
- certain medications, called ototoxic drugs, that are used to treat serious illnesses such as cancer.

For some people, tinnitus doesn't appear to be linked to any particular cause.

## **What's the link between tinnitus and hearing loss?**

Two-thirds of people with tinnitus have hearing loss, and so in many cases that might be what is causing tinnitus.

When we hear, sound waves travel through the ear into the cochlea, our hearing organ in the inner ear. The cochlea is lined with thousands of tiny sound-sensing cells called hair cells. These hair cells change the sound waves into electrical signals. The hearing nerve then sends these electrical signals to the hearing part of the brain, which analyses them and recognises them as sound.

When part of the ear or hearing nerve becomes damaged or doesn't work properly, this reduces the number of electrical signals usually sent to the brain.

Research has shown that the hearing part of the brain then 'fills in the gaps' of the sounds that are expected to come from the ear. This is one major cause of tinnitus.

What's more, if you have hearing loss, you may be more aware of tinnitus. This is because you won't hear as many environmental sounds that could otherwise help to mask it. In this case, using hearing aids or, in more severe cases, cochlear implants, may help with both hearing loss and tinnitus.

But this is not the whole story, because a third of people with tinnitus have normal hearing, and many people with hearing loss don't have tinnitus.

## What's the link between stress and tinnitus?

There's a known link between stress and tinnitus. Any source of stress can be a trigger for tinnitus, or make it worse. And some people, though not all, find that tinnitus makes them feel stressed and anxious. These feelings aren't always caused by tinnitus, but they can be made worse by it.

So a vicious circle develops: stress makes tinnitus worse, which leads to greater stress and anxiety. There are tinnitus therapies specifically designed to help break this cycle.

**More information:** See our factsheet **Stress and tinnitus**.

### Reduce your risk

If you've had tinnitus or dulled hearing for a day or so after you've been exposed to loud noise – for example, at a club or concert – it's a sign that you've experienced some temporary damage to your hearing.

If you continue to expose your ears to such high noise levels, you risk permanent tinnitus and hearing loss. Protect your ears by wearing noise-reducing earplugs at a gig or in a club – and by limiting the volume on your personal music player.

Find out more at [actiononhearingloss.org.uk/loudmusic](http://actiononhearingloss.org.uk/loudmusic)

## Is there a cure for tinnitus?

As yet, tinnitus can't be cured, but we're funding research to change this (**see page 19**). Of course, if there's an underlying cause of tinnitus that can be easily treated, such as an ear-wax blockage or an ear infection, treating this may get rid of the tinnitus. Otherwise, there are different therapies and self-help techniques that have been proven to help reduce the impact of tinnitus, so that you are not overly aware of it and it doesn't interfere with your daily life (**see page 12**).

## I think I have tinnitus – what should I do?

The first step is to see your GP. They should ask you to describe what you hear and how often you hear it. They'll also ask you how tinnitus affects you, if you have any other symptoms – such as hearing loss – and if you're taking any medication.

It might be that your tinnitus is caused by a problem that your GP can easily treat, such as an ear infection. If this isn't the case, your GP should refer you to the audiology department (which specialises in hearing and balance problems) or the ear, nose and throat (ENT) department of your local hospital for further tests.

If you find it hard to get a referral to audiology or ENT, tell your GP how your tinnitus is affecting you. Is it making you feel stressed or giving you sleep problems? Are you finding it difficult to cope? If you still can't get a referral, try seeing a different GP. You have the right to a second opinion.

## What will happen when I'm referred?

You'll be seen by either an audiologist or an ENT doctor. They will give your ears a thorough check-up and assess your hearing.

If your tinnitus is troubling you, you may then be referred to a specialist tinnitus centre for information and talking-style therapies to help you manage your tinnitus. However, not every hospital, or even every area, has a tinnitus specialist with skills in talking-style therapy. If you can't get a referral, you may be able to access tinnitus support from your audiology department instead.

## What can help me manage my tinnitus?

The clinician will explain to you what tinnitus is, how it can be caused and what might help. This can help to relieve any concerns or worries you might have. There's a range of therapies available to help you manage your tinnitus and reduce the impact that it has on your life. Some therapies also aim to reduce the stress that can be associated with tinnitus.

What's recommended for you will depend on the nature of your tinnitus, how it affects you and whether you have any other hearing problems.

Your audiologist or tinnitus specialist may recommend one or more of the following options, which we explain on the following pages:

- self-help techniques
- sound therapy, including sound generators and hearing aids
- relaxation exercises
- talking therapies
- mindfulness.

### **Self-help techniques**

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There are many simple things that can help you to manage tinnitus. Your audiologist or tinnitus specialist may support you with one or more of these things, but you can also try them without professional support:

- **Learn more about tinnitus** – understanding what tinnitus is, what causes it, how common it is and how you can manage it can be reassuring. For more information about tinnitus, visit [actiononhearingloss.org.uk/tinnitus](https://actiononhearingloss.org.uk/tinnitus)

- **Learn to relax** – stress can sometimes worsen tinnitus, so knowing how to reduce your stress levels can help you to manage tinnitus (**see page 16** for information on relaxation exercises).
- **Use calming music and sounds** to help take your mind off tinnitus.
- **Chat to others with tinnitus** – sharing experiences and tips with others who have tinnitus can be really useful. Try our online Tinnitus forum at **community.actiononhearingloss.org.uk** or contact our Tinnitus Helpline (**see page 23**) to find out where your nearest tinnitus support group is.
- **Let your family and friends know how tinnitus affects you**, so they better understand and know how to support you. They may find our factsheet **Helping friends and family with tinnitus** helpful.
- **Take steps to improve your general health** – having a well-balanced diet and taking regular exercise will help your overall wellbeing and may help you to cope with tinnitus more easily. Speak to your GP for advice.
- **Follow tips to help you sleep** – if tinnitus is affecting your sleep, simple steps like getting up at the same time each day and ‘winding down’ at least an hour before bed may help. Find more tips for getting a good night’s sleep in our factsheet **Stress and tinnitus**.
- **Protect your ears from loud noise** – exposure to too much loud noise can damage your ears and worsen existing tinnitus (**see ‘Reduce your risk’, page 9**).

**More information:** You can find our **Tinnitus** factsheets online at **actiononhearingloss.org.uk/tinnitusfacts** or order them from our Information Line (**see page 20**).

## Online support

Moodzone is a section of the NHS Choices website that offers practical advice, interactive tools, videos and audio guides to help you cope with stress, anxiety or depression. Visit [nhs.uk/conditions/stress-anxiety-depression](https://www.nhs.uk/conditions/stress-anxiety-depression)

## Sound therapy

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Many people find they are more aware of their tinnitus in a quiet environment. Sound therapy (or 'sound enrichment') works by filling the silence with sounds that distract you from listening to your tinnitus.

You can experiment with different sounds to find out what suits you best in different environments.

You might want to try:

- everyday sounds such as the TV, music or an electric fan
- recorded natural sounds like the sea or birdsong
- tinnitus apps (software applications) available for smartphones and tablet devices – they have a wide range of sounds to choose from, and some apps allow you to customise sounds for your needs.

## Sound generators

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Your audiology department or tinnitus centre may provide you with (or sell you) a sound generator (also known as a tinnitus relaxer), which produces a range of soothing sounds to create a peaceful atmosphere and distract you from your tinnitus. There are different types of sound generator available – some are for use at night, and some come with a variety of extra features, such as aromatherapy and coloured lights.

You can also buy tinnitus relaxers online, from stores including the Action on Hearing Loss shop:  
**[actiononhearingloss.org.uk/tinnitusproducts](https://actiononhearingloss.org.uk/tinnitusproducts)**

## **Wearable sound generators**

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You might find one or two wearable sound generators (sometimes called tinnitus maskers) helpful. They play a soft 'shushing' sound.

The type of sound generator that you might be offered will depend on what's available from your NHS service, and what's most appropriate for your needs.

## **Hearing aids or combination devices**

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If you have hearing loss and tinnitus, **hearing aids** can help with both. They can help you to hear better and will make environmental sounds louder, which can help to mask, or distract you from, your tinnitus.

Hearing aids will also make listening easier, so they can help to reduce any stress and anxiety that may be associated with hearing loss.

A **combination device** has all the advantages of a hearing aid but it also generates sounds to help mask tinnitus. These devices are now widely available both from the NHS and privately. Your audiologist will advise you whether this type of hearing aid could help you, and which type would be best.

## Relaxation exercises

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A regular relaxation routine can help you to manage the stress that is often associated with tinnitus (see ‘What’s the link between stress and tinnitus?’, **page 9**). You can learn to control your responses to stress by using relaxation exercises, which usually involve deep breathing, progressive muscle relaxation and rhythmic exercises. These exercises are taught in many tinnitus centres and audiology departments.

You could also try local adult education classes that specialise in relaxation techniques, yoga classes or mindfulness, which is a simple form of meditation (**see page 17**).

**More information:** See our factsheet **Stress and tinnitus**.

## Talking therapies

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If tinnitus is making you feel stressed or anxious, your audiologist or tinnitus specialist may refer you for a programme of talking therapy, such as cognitive behavioural therapy (CBT), or one-to-one or group sessions that focus on tinnitus.

CBT is a structured programme that can help you to examine your thought patterns and beliefs, and the way you do things, in order to understand why you react in certain ways. Research has shown that it can have a positive effect on tinnitus management. A therapist will encourage and support you to challenge your ways of thinking and feeling about tinnitus, and find the best way for you to deal with it.

CBT isn't always available in tinnitus centres, so your GP or tinnitus specialist might need to refer you to a trained CBT therapist if it's recommended as a suitable therapy.

If you can't get a referral to a specialist tinnitus centre and think you could benefit from a talking therapy, speak to your GP. Private counselling services are also available if you think this could help, but you may need to pay for those.

## **Mindfulness**

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Mindfulness is a simple form of meditation that involves paying more attention to the present moment – to your thoughts, feelings, bodily sensations, and the world around you. It has been shown to have a range of positive effects and can improve general wellbeing.

When used as a therapy for tinnitus, mindfulness is not expected to change the nature of the tinnitus, but it can change how you respond to it in a positive way, so you're able to cope with it better. It can help you to accept your tinnitus, so that you no longer fight it and it no longer causes you to feel distressed.

Mindfulness sessions are not available in all audiology departments, and you may need to be referred to a specialist centre if this therapy is recommended for you.

If you can't access mindfulness as part of a tinnitus management programme, you may find local classes, books, apps and online resources helpful. You can find out more about how mindfulness can help with tinnitus from the British Tinnitus Association (**see page 21** for contact details).

## **Why do I feel sensitive to sound?**

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Some people who are sensitive to sound also have tinnitus, but having one problem doesn't necessarily mean you will develop the other. The two can occur completely independently.

There are two main forms of sensitivity to sound:

- **Hyperacusis** – you find sound in general, or certain sounds, uncomfortable or painfully loud, even when they don't bother other people.
- **Misophonia or noise annoyance** – you find some sounds extremely irritating, even though you may not be particularly sensitive to sounds in general. If your dislike is strong enough, the term phonophobia is used.

**More information:** See our factsheet **Hyperacusis**.

## What tinnitus research does Action on Hearing Loss fund?

The tinnitus research that we fund is focused on improving our understanding of what happens in the body to cause tinnitus, and using this knowledge to develop and test treatments. We recently awarded funding to researchers at Johns Hopkins University in the USA to study how stress and anxiety impact on the severity of tinnitus, with the ultimate aim of developing a treatment to reduce it.

We also recently supported a research team at the University of Nottingham to develop standards for tinnitus research and clinical trials, to identify a core set of outcome measures to be used by all researchers and clinicians to monitor a person's tinnitus. This will make it easier to compare trials and studies with each other, and should push forward the development of effective treatments for tinnitus.

**More information:** To find out more about these tinnitus research projects and others, visit [actiononhearingloss.org.uk/biomedical-research](https://actiononhearingloss.org.uk/biomedical-research)

## Where can I get more information and support?

**Action on Hearing Loss** has a wide range of information on all aspects of deafness, tinnitus and hearing loss. We have the latest information on hearing health, hearing aids and cochlear implants, assistive technology and products, communication support, rights, benefits and more.

You can find out more about tinnitus by visiting [actiononhearingloss.org.uk/tinnitus](http://actiononhearingloss.org.uk/tinnitus) or by reading our **Tinnitus** factsheets:

- **Tinnitus – causes and therapies**
- **Stress and tinnitus**
- **Musical hallucinations**
- **Pulsatile tinnitus**
- **How to help friends and family with tinnitus.**

You can find our factsheets online at [actiononhearingloss.org.uk/publications](http://actiononhearingloss.org.uk/publications) or order them from our Information Line: call **0808 808 0123**, send a text message to **0780 000 0360** or email [information@hearingloss.org.uk](mailto:information@hearingloss.org.uk)

You can also contact our Information Line or visit our website to find out about services in your area, becoming a member and receiving our magazine, the latest research developments, and getting involved as a volunteer or supporter.

Our online **Tinnitus forum** is a lively and supportive space for people with tinnitus; visit [community.actiononhearingloss.org.uk](http://community.actiononhearingloss.org.uk)

## **Support from other organisations**

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**The British Tinnitus Association** (BTA) campaigns for better services for people with tinnitus. It supports a network of tinnitus groups, has a range of publications and produces a quarterly magazine, **Quiet**.

Telephone: **0800 018 0527**

Textphone: **0114 258 5694**

Email: **info@tinnitus.org.uk**

Website: **tinnitus.org.uk**

## **Information you can trust**

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The Information Standard certifies us as producers of high-quality, evidence-based information. For a list of references for this leaflet, please email **references@hearingloss.org.uk**

Thank you to **Prof Deborah Hall**, Professor of Hearing Sciences at the University of Nottingham, for reviewing this leaflet in June 2018 and making sure that our information is accurate and based on the latest research and evidence.

### **Did you find this information helpful?**

Please tell us what you think of this leaflet. Did you find it useful? Could we improve it? Please let us know by emailing **reviewpanel@hearingloss.org.uk**

If you'd like to join our Readers' Panel, to help us create and review information for our website and publications, please let us know.

## **Tinnitus products from the Action on Hearing Loss shop**

For product recommendations to suit your needs, or to request your **free product catalogue**, contact our Customer Services Team:

Telephone: **03330 144 525**

Textphone: **03330 144 530**

Email: **solutions@hearingloss.org.uk**

Shop online at: **[actiononhearingloss.org.uk/tinnitusproducts](https://actiononhearingloss.org.uk/tinnitusproducts)**

**5% off your order! (see note)**

Use the code **Shop2**

Note: Applies to all products. Excludes P&P and VAT.

**Action on Hearing Loss** (formerly RNID) is the largest UK charity helping people who are confronting deafness, tinnitus and hearing loss.

We give support and care, develop technology and treatments, and campaign for equality. We rely on donations to continue our vital work.

To find out more, visit **[actiononhearingloss.org.uk](http://actiononhearingloss.org.uk)**

**Questions about tinnitus, hearing loss or deafness?**

Call our free, confidential Tinnitus Helpline:

Telephone: 0808 808 6666

Textphone: 0808 808 9000

SMS: 0780 000 0360 (standard text message rates apply)

Email: **[tinnitus.helpline@hearingloss.org.uk](mailto:tinnitus.helpline@hearingloss.org.uk)**

**Join us**

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Twitter: @ActionOnHearing

- Health and care information you can trust  
The Information Standard: Certified Member
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- disability confident Employer
- Investors in People



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