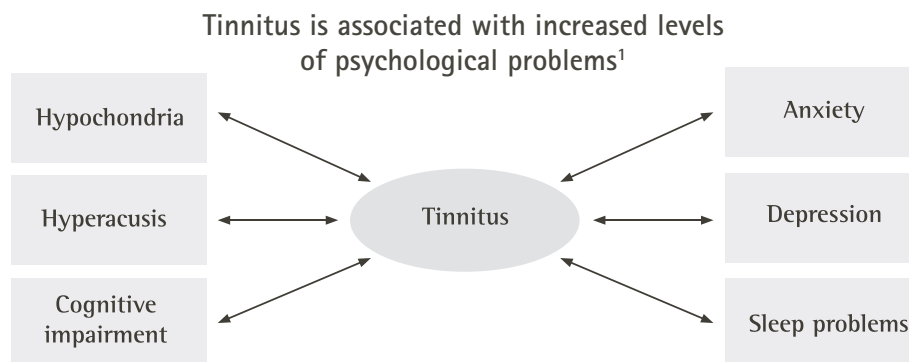


Tinnitus Key Facts For GPs

Facts & Stats

- Tinnitus is perceived sound in the absence of an external stimulus and is experienced by 10–15% of the population. The sound is usually unformed, such as buzzing, hissing or ringing.¹
- Main risk factors for tinnitus are hearing loss, increasing age and gender (male).¹
- Tinnitus is caused by potentially reversible changes in the brain, not the ear itself.²
- In most cases, tinnitus is associated with hearing impairment due to sudden hearing loss, noise trauma, age-related hearing loss or administration of ototoxic drugs.^{1,2}
- The prevalence of tinnitus is predicted to increase.³
- Patients with tinnitus and hearing loss often report psychological problems: frustration, annoyance, distress, irritability, anxiety, depression, insomnia, poor concentration. The severity can vary.^{1,4,5}
- Tinnitus can be managed but currently not cured. Treatment focuses on symptom reduction (such as hearing aid fitting) and management of psychological consequences of tinnitus.^{1,6}
- Components of tinnitus management may include sound stimulation (hearing aids, sound generators etc), education, relaxation therapy, psychological intervention (e.g. cognitive behavioural therapy) and drugs (antidepressants, anxiolytics, sedatives).^{1,6,7}



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References

- 1 Langguth B, et al. (2013) Lancet Neurol.12:920-930.
- 2 Norena AJ & Farley BJ. (2013) Hear Res. 295;161-171.
- 3 Roberts LE, et al. (2010) J Neurosci. 30:14972-14979.
- 4 Geocze L, et al. (2013) Braz J Otorhinolaryngol.79:106-111.
- 5 Robinson SK, et al. (2003) Int Tinnitus J. 9:97-103.
- 6 Hoare DJ, et al. (2011) Laryngoscope. 121:1555-1564.
- 7 Shekhawat GS, et al. (2013) J Am Acad Audiol. 24:747-762.

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