

Birmingham & District Tinnitus Group

This is printed as part of a series of occasional papers produced by
BIRMINGHAM & DISTRICT TINNITUS GROUP
presenting a variety of points to offer information and support for our members

TINNITUS COPING STRATEGIES

*A talk given by Mark Hassall, Senior Audiologist, Hearing Services Centre, Western Road on the occasion of the **Tinnitus Information and Awareness Day** organized by the Birmingham & District Tinnitus Group and held on 10 October 2009 at Carrs Lane Church Centre*

My experience with tinnitus patients has caused me to see who copes and who does not. Patients tend to fall into two groups: firstly, new patients who have experienced tinnitus for a few weeks or months. They are traumatised, panicking, full of what is happening to them: secondly, there are those who have experienced tinnitus for a long time. These have a large catalogue of tinnitus experiences, some positive, some negative. Indeed, they may have previously come to terms with their tinnitus, but this has now changed, so again they find they are not coping.

The danger for all is that they are full of what has happened to them and they find it difficult to listen. They are closed to new possibilities and perspectives on their tinnitus and they hear only themselves and their own story.

When I see patients with tinnitus **I try to listen** to them very carefully and to identify with them in their experience as fully as possible. Sometimes **their out-look may be very narrow** and they may feel they are in a tunnel with no end. Others may feel they have reached a dead end, having tried things which all seem to lead up a blind alley. The result is **their experience has coloured their outlook** and reinforced their beliefs which may be at best very incomplete, or wrong, and they then cannot move forward. They cannot see the wood for the trees. It's not a case, however, of "having to learn to live with it." **THERE IS A WAY OUT OF THIS EMOTIONALLY CHARGED SITUATION.** I cite here two examples:

First is a patient who attends with pulsatile tinnitus. He is quite agitated because he has had a number of appointments in the hospital but no one has told him what is going on. He has seen an ENT consultant but cannot remember his name and he sent him for some tests (hearing test and MRI scan). The MRI scan is in-conclusive and so he is sent to a consultant Neurologist who requests a further MRI scan, but the patient has not yet seen him for a review appointment to discuss the results. He then sees another ENT consultant who sends him for tinnitus counselling. So he comes to see me. The patient has now two sets of notes - main hospital notes and Audiology notes and he thinks his notes must be incomplete as I have not got a copy of every test and consultation in the audiology notes. I explain some re-cords are paperless on the computer, but they are available for me to see. The patient feels he has been messed about because he keeps being sent to different people and no one has hold him why he is experiencing tinnitus so they don't know what they are doing.

Secondly, we have a patient who is stressed because his tinnitus has changed. About 8 years ago, he began to experience tinnitus and could not carry on with his job. He was at home a lot and on benefits. He had to work very hard to get his life together and became a self employed gardener so is out in the fresh air and has some flexibility over his work hours. He can reschedule commitments if the tinnitus is too bad. The tinnitus then worsens and the patient seeks further help be-cause he is frightened that everything he has worked for could be lost and he will be back in the same place he was previously. This patient tells me he had come to a point where he accepts the tinnitus may not return to the previous level, because if he doesn't he cannot move forward.

Coping strategies are like having arrows in your quiver. Different things are appropriate at different times. The strategies may also change over time. Coping strategies help to change the person's perspective on who is in control. Is the tinnitus in control of you or are you in control of the tinnitus?

REMEMBER: We are all different and the cause of the tinnitus will doubtless be different for each individual. THEREFORE DO NOT COMPARE YOUR-SELF WITH ANYONE ELSE WHO EXPERIENCES TINNITUS.

It is also true that different things help different individuals. What works for Mrs Smith down the road, who

has had tinnitus for twenty years, may not be helpful for you. If someone has been to the hospital and has been given something to help with their tinnitus, and that something is different from what you have been given, this is not because they can have something that you cannot, but because different things will help different people.

COPING STRATEGIES THAT HAVE WORKED FOR MANY

TRY TO FORGET ABOUT IT

For some people they just need to forget about the tinnitus and to get on with their life. Talking about the tinnitus is unhelpful and focusing on it makes them not cope when they were doing fine.

For others they need an initial investigation, an opportunity to discuss the tinnitus in order to know boundaries and to find reassurance and they then find no further discussion is necessary.

INFORMATION

Some people want information. At this stage they may not want to study this in depth or follow it up. They may just put the information in a drawer, to be used if they need it.

Some people want to gather as much information as possible. They research via the internet and may join a group and become active in supporting research and in improving the tinnitus profile. They may want to read books etc and just need to find out as much as possible.

Some need information which they can file away and then they proceed to get on with their lives.

NETWORKING

Being able to share with other people who experience tinnitus offers support. Being a member of a local tinnitus group and/or attending a relaxation class is a great way to achieve this.

Some people find having others to talk to in a social context can be a great help. They don't feel so alone and can learn from other people's experience.

Relaxation is used by some to reduce their stress levels and this helps their tinnitus. Techniques learned can be employed and increased stress is recognised and dealt with.

SOUND THERAPY

This can come in a variety of forms:

- Hearing aids
- Noise generators
- Under Pillow Speakers
- Sound Ball
- Environmental Sound
- Listening to other devices
- Listening to TV, Radio, fridge, CD player, I Pod, MP3 player.

Being out in the fresh air and going for long walks greatly helps to cope with the tinnitus. Some find the tinnitus is not present when outside but only in the house.

DISTRACTION

- Having a very structured day
- Being on the go all the time
- Trying to be occupied and so absorbed that you lose yourself

FAMILY AND FRIENDS

Coping with family and friends can pose problems. What do family or friends do when nothing seems to help?

Does the family understand if the person with the tinnitus needs a little space? Will they think you're being

difficult?

It's always worth talking things over when there isn't a crisis. It may help by talking to a neutral person.

DISTURBED SLEEP PATTERN

People say: "I cannot get to sleep because of my tinnitus" or "I wake up in the night and cannot get back to sleep" or "My tinnitus wakes me up."

Some things that can help;

- Going to bed at a regular time
- A relaxing drink last thing
- Using relaxation techniques before going to bed
- Trying not to get stressed because of a bad experience
- Having a shower before going to bed to help you relax
- Check that the bedroom is a relaxing environment.

DIET

Test it out. Don't just stop eating or drinking something that you suspect makes your tinnitus worse. Avoid it for a while, then include it in your menu, then avoid it again.

RELAXATION

- Building into your life times to relax.
- Holidays, outings, doing things you enjoy.
- Deep breathing. You don't need a long time, just a couple of minutes.
- Join a relaxation class.

ALTERNATIVE THERAPIES

The usual stance I take on these is that it is up to the individual to decide if they want to try them. I am not endorsing therapies.

Some examples are:

Acupuncture, Alexander Technique, Aromatherapy, Biofeedback, Chiropractic, Counselling, Herbology, Homeopathy, Hyperbaric Oxygen Therapy, Hypnosis, Intratympanic injections, Iontophoresis, Low intensity Laser application, Magnetic Stimulation, Massage, Meditation, Nutrition, Osteopathy, Psychotherapy, Reflexology, Relaxation, Stomatognathic Treatment, Stress Diffusion, Transcutaneous Electrical Nerve Stimulation (TENS), Ultrasonic Stimulation, Yoga.

These therapies tend to help reduce stress, which in turn helps the tinnitus.

Useful contacts :

Birmingham & District Tinnitus Group

website : www.tinnitusbham.org.uk email : info@tinnitusbham.org.uk

Papers available on our website under 'support' include:

Coping Strategies and, also, Members' Coping Strategies

Relaxation - a six part series

Help for the Helpers

British Tinnitus Association - Freephone 0800 018 0527

website : www.tinnitus.org.uk email : info@tinnitus.org.uk

Leaflets on the BTA's website under 'information for everyone' include:

- Drugs, Food and Drink
- Complementary Therapy for Tinnitus: An Opinion
- Good Night - Sleep Tight

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