

Support for people with tinnitus

Policy statement

Our position

Tinnitus is an irreversible condition for many people and its affects are often underestimated. Action on Hearing Loss believes that high quality support, therapies and information about tinnitus are vital in helping to ease the distress that can be experienced people with tinnitus. It is imperative that the provision of audiology and tinnitus services should be protected and that any local variation in access and quality of services should be addressed. Some causes of tinnitus are preventable, such as the effects of loud noise, and it is important that the general public are better educated on how to protect themselves.

Introduction

In 2013 Action on Hearing Loss launched a new strategy, [Taking Action](#).¹ It set out our goals of working towards finding a cure for tinnitus, and providing information and support to help ease the distress experienced by millions of people who have tinnitus.

This policy statement sets out what tinnitus is, and outlines the main issues for people with tinnitus. It also includes our stand on the issues and what we are doing.²

We use the term ‘people with hearing loss’ to refer to people who are deaf, deafened and hard of hearing throughout.

Background

Tinnitus is a medical term to describe the perception of noise either in one ear, both ears or in the head, when there is no corresponding external sound. An estimated six million adults in the UK have mild tinnitus, which is 10% of the population.³

The effects of tinnitus can differ from person to person. Many people are not troubled by it, but for others it can impact on their life, even leading to depression, anxiety or social isolation. It can also have a negative impact on relationships. Around 600,000 people across the UK have tinnitus that severely affects their quality of life.⁴

A range of different things can cause tinnitus. Often people with hearing loss can go on to develop tinnitus, although the two can also occur independently. Other causes include ear,

¹ <http://www.actiononhearingloss.org.uk/strategy>

² Please note that, like many policy documents, this statement reflects the issues relevant at the time of writing. Over time this may be subject to change, such as new legislation, and we may review and amend the document.

³ Action on Hearing Loss, ‘Hearing Matters’, 2011, www.actiononhearingloss.org.uk/hearingmatters

⁴ Action on Hearing Loss, ‘Hearing Matters’, 2011, www.actiononhearingloss.org.uk/hearingmatters

or head injuries, ear diseases or infections, exposure to noise, and some medications that are poisonous to the ear. Stress and anxiety can cause tinnitus or make it worse.

Although there is currently no cure for tinnitus, there are therapies available that can help people reduce the impact it can have on their lives.

Evidence

Tinnitus services, which can provide equipment and support for people with tinnitus, such as hearing therapies, counselling, and access to support groups, are provided for free on the NHS. In 2009 the UK Department of Health published a best practice guide for the treatment and management of tinnitus, including commissioning services. The guide can be found [here](#).⁵ Many people find tinnitus services invaluable. They can improve quality of life and prevent isolation and mental health issues. However, there is a need for further research to evaluate these services and their impacts, and to show which services are most effective for people with tinnitus.

Tinnitus services can only be accessed via the GP or a referral from an audiology or Ear Nose and Throat department. We know that the GP can be a barrier to accessing services for people with hearing loss – one study found that 45% of people with hearing loss were not referred for hearing test or hearing aids when they reported their hearing loss – and this is likely to be similar for people reporting tinnitus. A proportion of this group will have tinnitus too and are unlikely to have received any information or referral for investigation of their tinnitus.

Following anecdotal evidence received by Action on Hearing Loss indicating that the provision of tinnitus services was being affected by budget cuts, we conducted a mapping exercise to find out whether this was the case. Action on Hearing Loss's 2012 [Cut Off](#) report⁶ used data gathered via Freedom of Information (FOI) requests from heads of audiology at 128 NHS Trusts in England and all seven Health Boards in Wales to reveal the level of provision for people with tinnitus. The report found that in England, the majority of Trusts (90%) offered information about products and other tinnitus services and a similar percentage (84%) also provide specialist tinnitus support either directly or via a referral. In Wales, all Health Boards provided information about products and services, but only 71% provided or referred to specialist tinnitus support. Three-quarters of services in England and Wales also offered or provide referral to hearing therapy, and cognitive behavioural therapy is available or accessible via referral in approximately half of the areas. There are therefore a number of areas that don't offer proper support for people living with tinnitus. The impact of this is likely to be devastating for individuals and their families in these areas.

In 2010 Action on Hearing Loss published a research report entitled [What's That Noise?](#)⁷ which was undertaken to gain a better understanding of people's experience of living with tinnitus and getting support for their tinnitus in Northern Ireland. The report found that the numbers of people with tinnitus who present to Health and Social Care (HSC) are not recorded and revealed gaps in the provision of tinnitus services in Northern Ireland. Up to 275,000 people in Northern Ireland have tinnitus to some degree; our research shows that at

⁵ http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_093844

⁶ Action on Hearing Loss, 'Cut Off', 2012, www.actiononhearingloss.org.uk/cutoff

⁷ <http://www.actiononhearingloss.org.uk/about-us/northern-ireland/improving-tinnitus-services-in-northern-ireland.aspx>

least 7,000 people have severe tinnitus, which significantly affects their ability to lead a normal life. As a consequence in 2013 Action on hearing Loss published a [Tinnitus strategy for Northern Ireland](#).⁸ This recommended the development of a new tinnitus pathway, an expansion of tinnitus services to meet the needs of people in each area and measures to increase awareness of tinnitus among GPs.

Recommendations

Tinnitus is an irreversible condition for many people and its affects are underestimated. We are calling on Governments, audiology service providers and commissioners to:

- Raise awareness of what tinnitus is and what can be done to manage it among the general public and health professionals.
- protect the provision of audiology and tinnitus services.
- address local variation in the provision of and access to services.
- evaluate the effectiveness of support and therapies such as sound therapy, mindfulness training and cognitive behavioural therapy used for the management of tinnitus.

Action on Hearing Loss will:

- Provide support and information to individuals who have tinnitus and to health professionals.
- fund research into treatments and possible cures for tinnitus.
- provide information about the dangers of over-exposure to loud noise to the ears and inform people about the protection that is available.
- develop and supply specialist products that can help relieve the symptoms of tinnitus.

⁸ <http://www.actiononhearingloss.org.uk/news-and-events/n-ireland/news/tinnitus-strategy-launch.aspx>