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Tinnitus

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Nanjunda Swamy sent you the following:

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Report Information from ProQuest

November 07 2013 05:25

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98. Carbamazepine reduces the behavioural manifestations of tinnitus following salicylate treatment in rats.
99. Influence of silence and attention on tinnitus perception.
100. Tinnitus rehabilitation: a mindfulness meditation cognitive behavioural therapy approach.

Bibliography

Search Strategy

Set#	Searched for	Databases	Results
S3	tinnitus AND yr(2008-2012)	ComDisDome	229°
S2	tinnitus AND yr(2000-2019)	ComDisDome	1194°
S1	tinnitus	ComDisDome	2921°

Document 1 of 100

Tinnitus relief: at what cost?

Author: Jacobson, Gary

Publication info: Journal of the American Academy of Audiology 23.2: 80. Canada: Canada. (Feb 2012)

[ProQuest document link](#)

Abstract: None available.

Subject: *Acoustic Stimulation: economics; Female; *Hearing Aids: economics; Humans; Male; *Tinnitus: economics; *Tinnitus: therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Supplemental data: Comment On: J Am Acad Audiol. 2012 Feb; 23(2):126-38[22353681]

Correspondence author: Jacobson, Gary

Publication title: Journal of the American Academy of Audiology

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Year: 2012

Location: Canada

ISSN: 1050-0545

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Language of publication: English (eng)

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Last updated: 2012-07-13

Database: ComDisDome

Document 2 of 100

Patient preferences and willingness to pay for tinnitus treatments.

Author: Tyler, Richard S11 Department of Otolaryngology-Head and Neck Surgery and Communication Sciences and Disorders, University of Iowa, IA, USA. Rich-tyler@uiowa.edu

Publication info: Journal of the American Academy of Audiology 23.2 (Feb 2012): 115-125.

[ProQuest document link](#)

Abstract: Purpose: There will likely be several different tinnitus treatments necessary, and it is important to understand patient preferences and factors that might contribute to treatment acceptability. This study explores the acceptability of a wide range of different tinnitus treatments, from noninvasive wearable devices to surgically implanted devices in the brain. Understanding how tinnitus sufferers consider and rank such options and how they might be influenced by their own perception of the severity of their tinnitus could help clinicians, researchers, and companies plan future efforts for approaching new treatments. Data Collection and Analysis: 197 tinnitus self-help group attendees rated their acceptance of treatments on a scale from 0 (not acceptable) to 100 (fully acceptable). The treatments included external devices, medications, cochlear implants, an implant on the brain surface, and an implant in the brain. They were also asked how much they would pay for successful treatments. Results: There was a significant correlation between loudness and annoyance ($r = .78$). To reduce tinnitus by half, an "acceptable" response between 91 and 100 was reported by 30% of the respondents for devices, by 52% for pills, by 25% for cochlear implants, by 13% for implants on the brain surface, and by 13% for implants in the brain. To reduce tinnitus completely, a 91-100 acceptable response was reported by 42% for devices, by 62% for pills, by 38% for cochlear implants, by 21% for implants on the brain surface, and by 19% for implants in the brain. To reduce tinnitus completely, participants most commonly selected to pay at least \$5000, and 20.3% were willing to pay as much as \$25,000. The ratings of tinnitus loudness and annoyance were positively correlated with the likelihood of using any treatment. Surprisingly, there was a weak relationship between annoyance and the amount they were willing to pay. Conclusions: Tinnitus patients are prepared to accept a wide variety of treatments. Medications are the most acceptable. Invasive procedures can also be acceptable to many, particularly if they provide complete relief. American Academy of Audiology.

Subject: Acoustic Stimulation: economics; Acoustic Stimulation: standards; Adolescent; Adult; Age Distribution; Aged; Aged, 80 and over; Child; Cochlear Implants: economics; Cochlear Implants: statistics & numerical data; Drug Therapy: economics; Drug Therapy: statistics & numerical data; Electrodes, Implanted: economics; Electrodes, Implanted: statistics & numerical data; *Health Care Costs; Hearing Aids: economics; Hearing Aids: statistics & numerical data; Humans; Middle Aged; *Patient Acceptance of Health Care: statistics & numerical data; *Patient Preference: statistics & numerical data; Questionnaires; Severity of Illness Index; Tinnitus: economics; Tinnitus: surgery; Tinnitus: therapy; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Tyler, Richard S

Publication title: Journal of the American Academy of Audiology

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ProQuest document ID: 963835868

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Last updated: 2012-07-13

Database: ComDisDome

Document 3 of 100

A comparison of benefit and economic value between two sound therapy tinnitus management options.

Author: Newman, Craig W1; Sandridge, Sharon A1 Cleveland Clinic, Cleveland, OH, USA.
newmanc@ccf.org

Publication info: Journal of the American Academy of Audiology 23.2 (Feb 2012): 126-138.

[ProQuest document link](#)

Abstract: Sound therapy coupled with appropriate counseling has gained widespread acceptance in the audiological management of tinnitus. For many years, ear level sound generators (SGs) have been used to provide masking relief and to promote tinnitus habituation. More recently, an alternative treatment device was introduced, the Neuromonics Tinnitus Treatment (NTT), which employs spectrally-modified music in an acoustic desensitization approach in order to help patients overcome the disturbing consequences of tinnitus. It is unknown, however, if one treatment plan is more efficacious and cost-effective in comparison to the other. In today's economic climate, it has become critical that clinicians justify the value of tinnitus treatment devices in relation to observed benefit. To determine perceived benefit from, and economic value associated with, two forms of sound therapy, namely, SGs and NTT. Retrospective between-subject clinical study. A sample of convenience comprised of 56 patients drawn from the Tinnitus Management Clinic at the Cleveland Clinic participated. Twenty-three patients selected SGs, and 33 patients selected NTT as their preferred sound therapy treatment option. Sound therapy benefit was quantified using the Tinnitus Handicap Inventory (THI). The questionnaire was administered before and 6 mo after initiation of tinnitus treatment. Prior to device fitting, all patients participated in a 1.5 hr group education session about tinnitus and its management. Economic value comparisons between sound therapy options were made using a cost-effectiveness analysis (CEA) and cost-utility analysis (CUA). THI scores indicated a significant improvement ($p < 0.001$) in tinnitus reduction for both treatment types between a pre- and 6 mo postfitting interval, yet there were no differences ($p > 0.05$) between the treatment alternatives at baseline or 6 mo postfitting. The magnitude of improvement for both SGs and NTT was dependent on initial perceived tinnitus handicap. Based on the CEA and CUA economic analyses alone, it appears that the SGs may be the more cost-effective alternative; however, the magnitude of economic value is a function of preexisting perceived tinnitus activity limitation/participation restriction. Both SGs and NTT provide significant reduction in perceived tinnitus handicap, with benefit being more pronounced for those patients having greater tinnitus problems at the beginning of therapy. Although the economic models favored the SGs over the NTT, there are several other critical factors that clinicians must take into account when recommending a specific sound therapy option. These include initial tinnitus severity complaints and a number of patient preference variables such as sound preference, listening acceptability, and lifestyle. American Academy of Audiology.

Subject: *Acoustic Stimulation: economics; Acoustic Stimulation: methods; Adult; Aged; Cost-Benefit Analysis; Female; Habituation, Psychophysiologic; *Hearing Aids: economics; Humans; Male; Middle

Aged; Music; Perceptual Masking; Quality of Life; Quality-Adjusted Life Years; Questionnaires; Retrospective Studies; *Tinnitus: economics; Tinnitus: epidemiology; *Tinnitus: therapy; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

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Database: ComDisDome

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Noise-induced tinnitus: a comparison between four clinical groups without apparent hearing loss.

Author: Lindblad, Ann-Cathrine¹; Hagerman, Björn; Rosenhall, Ulf¹ Department of Clinical Science, Intervention and Technology, Karolinska Institutet, Stockholm, Sweden. anncat.lindblad@ki.se

Publication info: Noise & health 13.55 (Nov 2011): 423-431.

[ProQuest document link](#)

Abstract: The number of people with normal hearing thresholds seeking medical help for tinnitus and other hearing problems is increasing. For diagnostic purposes, existence/nonexistence of lesions or combinations of lesions in the inner ear not reflected in the audiogram was evaluated with advanced hearing tests applied to tinnitus patients with certain backgrounds, including noise exposure. For forty-six patients with pronounced tinnitus, and other symptoms, tentative diagnoses were established, including judgments of the influence of four causative factors: (1) acoustic trauma, (2) music, (3) suspected hereditary, and (4) nonauditory, for example, stress or muscular tension. They were analyzed with a test

battery sensitive to lesions involving the outer hair cells, damage from impulse noise, and dysfunction of the efferent system. There were significant differences in test results between groups with individuals with the same most likely causative factor. Most patients claiming acoustic trauma had a specific type of result, 'hyper-PMTF' (psychoacoustical modulation transfer function), and abnormal test results of the efferent system. Everyone in the hereditary group had dysfunction of the efferent system. All patients working with music, except one, had some abnormality, but without specific pattern. The nonauditory group mostly had normal test results. The investigation shows that it is possible to diagnose minor cochlear lesions as well as dysfunction of the efferent system, which might be causing the tinnitus. Those abnormalities could not be detected with routine audiological tests. Malfunctioning caused by impulse noise is an obvious example of this. These findings facilitate choice of treatment, rehabilitation programs, and medicolegal decisions.

Subject: Adult; Audiometry, Pure-Tone: methods; Environmental Exposure: adverse effects; Female; Genetic Predisposition to Disease; Hearing Loss, Noise-Induced: complications; *Hearing Loss, Noise-Induced: diagnosis; Humans; Male; Military Personnel; Music; *Noise: adverse effects; Occupational Exposure: adverse effects; Psychoacoustics; Sweden; *Tinnitus: diagnosis; Tinnitus: etiology; Tinnitus: genetics

Record owner: National Library of Medicine

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Correspondence author: Lindblad, Ann-Cathrine

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Language of publication: English (eng)

Document type: Comparative Study, Non-u.s. Gov't, Journal Article, Research Support

Subfile: Index Medicus

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Accession number: pmid-22122959

ProQuest document ID: 914298301

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Last updated: 2012-07-13

Database: ComDisDome

Document 5 of 100

An epidemiologic study of tinnitus in a population in Jiangsu Province, China.

Author: Xu, Xia1; Bu, Xingkuan; Zhou, Ling; Xing, Guangqian; Liu, Cheng; Wang, Dengyuan1 Department

of Otolaryngology, Nanjing Medical University, Nanjing, China.

Publication info: Journal of the American Academy of Audiology 22.9 (Oct 2011): 578-585.

[ProQuest document link](#)

Abstract: Tinnitus is a common complaint and often of no clinical significance. There are a number of unresolved issues concerning the etiology, pathogenesis, and natural history of tinnitus. There are a few current population-based estimates of the prevalence of tinnitus done in representative large geographic areas, but there is little data from multi-area, large sample studies of tinnitus in China. To investigate the prevalence of tinnitus and related factors in a Chinese population. These data would be used to plan and evaluate health-care services. We carried out an epidemiologic study of tinnitus as part of an epidemiologic study of ear and hearing disorders that was undertaken in Jiangsu Province, China. A question about tinnitus history was included in a comprehensive questionnaire about hearing. All participants also had both pure tone audiometry and an otological examination. The sample consisted of 6333 people 10 yr of age or older, selected by the methods of probability proportional to size. All participants answered a questionnaire concerning their tinnitus and had pure tone audiometry testing and an ear examination. All data were entered using EPIDATD 3.0 software and analyzed by a chi-squared test and test for trends. The overall prevalence of tinnitus was 14.5%, and the standardized rates were 11.4% in the whole country and 12.4% in Jiangsu province. Its prevalence increased with age. The prevalence of tinnitus was 11.9 and 15.6% in urban and rural residents, respectively. There was no significant difference in prevalence between men and women. Hearing impairment, history of middle ear infections, and noise exposure were the main risk factors for tinnitus. Tinnitus is a common problem in the population. With the aging of the population, the prevalence of tinnitus will increase. The prevention of tinnitus should focus on hearing impairment screening, otitis media treatment, and noise exposure reduction. Health services in rural areas should emphasize prevention more. American Academy of Audiology.

Subject: Adolescent; Adult; Aged; Aged, 80 and over; Child; China: epidemiology; Female; Humans; Male; Middle Aged; Prevalence; Questionnaires; *Tinnitus: epidemiology; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Xu, Xia

Publication title: Journal of the American Academy of Audiology

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Issue: 9

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Number of pages: 8

Publication year: 2011

Year: 2011

Location: Canada

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ProQuest document ID: 914300934

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Last updated: 2012-07-13

Database: ComDisDome

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Prevalence and significance of high-frequency hearing loss in subjectively normal-hearing patients with tinnitus.

Author: Kim, Dong-Kee1; Park, Shi-Nae; Kim, Hyung Min; Son, Hye Rim; Kim, Nam-Gyun; Park, Kyoung-Ho; Yeo, Sang Won1 Department of Otolaryngology-Head and Neck Surgery, The Catholic University of Korea, College of Medicine, Seoul, Korea.

Publication info: The Annals of otology, rhinology, and laryngology 120.8 (Aug 2011): 523-528.

[ProQuest document link](#)

Abstract: We investigated the incidences of high-frequency hearing loss (HFHL; above 2 kHz) and extended high-frequency hearing loss (EHFHL; above 8 kHz) in patients with tinnitus and subjectively normal hearing, and evaluated their effects on the clinical and audiological features of the patients. The sample included 85 patients with sensorineural tinnitus who had normal hearing sensitivity in the frequencies from 250 Hz to 2 kHz, and who had undergone extended high-frequency audiometry between July 2009 and February 2010. We investigated the incidences of HFHL and EHFHL in these patients and analyzed the significance of the hearing losses. The incidence of HFHL or EHFHL was 88%. The proportion of patients with EHFHL, among the patients who had normal hearing sensitivity up to 8 kHz, was about 74%. The patients with normal hearing sensitivity at all test frequencies were significantly younger, had larger otoacoustic emissions, and had tinnitus that was less loud as measured by tinnitus matching than did the subjects with HFHL and/or EHFHL. However, other comparisons of clinical factors in the three groups did not show any differences. Even if patients with tinnitus do not have any subjective hearing impairment, most of them have HFHL and/or EHFHL. The effects on the clinical features of the patients are still vague.

Subject: Adult; Audiometry; Auditory Threshold; Case-Control Studies; *Hearing Loss, High-Frequency: complications; Hearing Loss, High-Frequency: diagnosis; *Hearing Loss, High-Frequency: epidemiology; Humans; Incidence; Middle Aged; Prevalence; Quality of Life; *Tinnitus: complications; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kim, Dong-Kee

Publication title: The Annals of otology, rhinology, and laryngology

Volume: 120

Issue: 8

Pages: 523-528

Number of pages: 6

Publication year: 2011

Year: 2011

Location: United States

ISSN: 0003-4894

Source type: Scholarly Journals

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Language of publication: English (eng)

Document type: Journal Article

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ProQuest document ID: 914298519

Document URL: <http://search.proquest.com/docview/914298519?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

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Development of the self-efficacy for tinnitus management questionnaire.

Author: Smith, Sherri L1; Fagelson, Marc1 Research and Development Service, Department of Veterans Affairs, James H. Quillen Veterans Affairs Medical Center, Mountain Home, TN, USA. sheri.smith@va.gov

Publication info: Journal of the American Academy of Audiology 22.7 (Jul 2011): 424-440.

[ProQuest document link](#)

Abstract: Self-efficacy refers to the beliefs (i.e., confidence) individuals have in their capabilities to perform skills needed to accomplish a specific goal or behavior. Research in the treatment of various health conditions such as chronic pain, balance disorders, and diabetes shows that self-efficacy beliefs play an important role in treatment outcomes and management of the condition. This article focuses on the application of self-efficacy to the management of tinnitus. The first step in formally incorporating self-efficacy in existing treatment regimens or developing a self-efficacy approach for tinnitus treatment is to have a valid and reliable measure available to assess the level of tinnitus self-efficacy. The objective of this study was to develop the Self-Efficacy for Tinnitus Management Questionnaire (SETMQ) and to obtain the psychometric properties of the questionnaire in a group of patients with tinnitus. Observational study. A total of 199 patients who were enrolled in the Tinnitus Clinic at the James H. Quillen Veterans Affairs Medical Center participated in the current study. The SETMQ was mailed to patients enrolled in the Tinnitus Clinic. The participants who completed one copy of the SETMQ were mailed a second copy to complete approximately 2 weeks later. An exploratory factor analysis was conducted to identify the most coherent subscale structure of the SETMQ. The internal consistency and test-retest reliability for each of the subscales and the questionnaire as a whole were assessed. The validity of the SETMQ also was evaluated by investigating the relations between the SETMQ and other clinical measures related to tinnitus. Five components emerged from the factor analysis that explained 75.8% of the variance related to the following areas: (1) routine tinnitus management, (2) emotional response to tinnitus, (3) internal thoughts and interaction with others, (4) tinnitus concepts, and (5) use of assistive devices. Four items failed to load on any factor and were discarded, resulting in 40 items on the final SETMQ. The internal consistency reliability of the overall questionnaire and for each subscale was good (Cronbach's α ranged from .74 to .98). Item-total correlations ranged from .47 to .86, indicating that each item on the SETMQ correlated at a moderate or marked level with the SETMQ aggregate score. Intraclass correlation coefficients were computed to determine the test-retest reliability of the SETMQ total scale and separately for each subscale, which were all above .80, indicating good test-retest reliability. Correlations among the SETMQ subscales and various tinnitus-related measures (e.g., Tinnitus Handicap Inventory, tinnitus loudness rating, tinnitus distress rating, etc.) were significant, albeit indicative of fair to good relations overall (range $r = -.18$ to $-.53$). The results of the current study suggest that the SETMQ is a valid and reliable measure that may be an insightful instrument for clinicians and investigators who are interested in assessing tinnitus self-efficacy. Incorporating self-efficacy principles into tinnitus management would provide clinicians with another formalized treatment option. A self-efficacy approach to treating tinnitus may result in better outcomes compared with approaches not focusing on self-efficacy principles. American Academy of Audiology.

Subject: Adaptation, Psychological; Adult; Aged; Aged, 80 and over; Audiometry, Pure-Tone: statistics &

numerical data; Auditory Threshold; Awareness; Disability Evaluation; Female; Humans; Hyperacusis: diagnosis; Hyperacusis: psychology; Male; Middle Aged; Psychometrics: statistics & numerical data; *Questionnaires; Reproducibility of Results; *Self Efficacy; *Tinnitus: psychology; Tinnitus: therapy; *Veterans: psychology

Record owner: National Library of Medicine

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Correspondence author: Smith, Sherri L

Publication title: Journal of the American Academy of Audiology

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Subfile: Index Medicus

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Last updated: 2012-07-13

Database: ComDisDome

Document 8 of 100

The influence of military service on auditory health and the efficacy of a Hearing Conservation Program.

Author: Muhr, Per1; Rosenhall, Ulf1 Department of Clinical Neurosciences, Clinical Science, Intervention and Technology, Division of ENT and Hearing, Karolinska Institute, Sweden. per.muhr@mil.se

Publication info: Noise & health 13.53 (Jul 2011): 320-327.

[ProQuest document link](#)

Abstract: The influence of military service on self-assessed hearing symptoms and measured auditory function was studied as well as the efficacy of the Hearing Conservation Program (HCP) of the Swedish Armed Forces. 839 conscripts were recruited for the study at reporting to military service. They were all exposed to noise over the risk-limits from weapons and vehicles and used earmuffs and/or earplugs. Questionnaires and pure tone screening audiometry were studied at the start and the end of the military

service. Retrospective information regarding audiometry at conscription before military service was included as control. The prevalence values of tinnitus were 23% before and 32% after the service and of sensitivity to noise 16% and 19% respectively. The prevalence values of hearing impairment were 6.3% at conscription, 14.5% at reporting to military service, and 24% after the training period. The incidence values of hearing decline were 3.7% during the period with no military noise exposure and 6.6% during the military service. Acoustic accident increased the risk of worsened tinnitus and sensitivity to noise four times and for a high frequency hearing decline six times. We observed elevated prevalence values of tinnitus, sensitivity to noise and hearing impairment at discharge compared to before military service. We observed an elevated risk of hearing decline during military service. Acoustic accident increased the risk of tinnitus, noise sensitivity and hearing decline. We suggest improvements regarding inclusion criteria for military service, and for education regarding the HCP.

Subject: Audiometry; Ear Protective Devices; Health Behavior; Health Knowledge, Attitudes, Practice; Hearing; *Hearing Loss, Noise-Induced: epidemiology; Hearing Loss, Noise-Induced: prevention & control; Humans; Logistic Models; Longitudinal Studies; Male; Military Personnel: psychology; *Military Personnel: statistics & numerical data; *Noise, Occupational: adverse effects; *Occupational Diseases: epidemiology; *Occupational Diseases: etiology; Occupational Diseases: prevention & control; Prevalence; Questionnaires; Sweden: epidemiology; Tinnitus: epidemiology; Tinnitus: etiology; Young Adult

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Correspondence author: Muhr, Per

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Document 9 of 100

Melatonin: can it stop the ringing?

Author: Hurtuk, Agnes¹; Dome, Claudia; Holloman, Christopher H; Wolfe, Kelly; Welling, D Bradley; Dodson, Edward E; Jacob, Abraham¹ Department of Otolaryngology-Head and Neck Surgery, The Ohio State University Eye and Ear Institute, Columbus, Ohio 43212, USA.

Publication info: The Annals of otology, rhinology, and laryngology 120.7 (Jul 2011): 433-440.

[ProQuest document link](#)

Abstract: We sought to report the efficacy of oral melatonin as treatment for chronic tinnitus and to determine whether particular subsets of tinnitus patients have greater benefit from melatonin therapy than others. This was a prospective, randomized, double-blind, crossover clinical trial in an ambulatory tertiary referral otology and neurotology practice. Adults with chronic tinnitus were randomized to 3 mg melatonin or placebo nightly for 30 days followed by a 1-month washout period. Each group then crossed into the opposite treatment arm for 30 days. The tests audiometric tinnitus matching (TM), Tinnitus Severity Index (TSI), Self Rated Tinnitus (SRT), Pittsburgh Sleep Quality Index (PSQI), and Beck Depression Inventory (BDI) were administered at the outset and every 30 days thereafter to assess the effects of each intervention. A total of 61 subjects completed the study. A significantly greater decrease in TM and SRT scores ($p < 0.05$) from baseline was observed after treatment with melatonin relative to the effect observed with placebo. Male gender, bilateral tinnitus, noise exposure, no prior tinnitus treatment, absence of depression and/or anxiety at baseline, and greater pretreatment TSI scores were associated with a positive response to melatonin. Absence of depression and/or anxiety at baseline, greater pretreatment TSI scores, and greater pretreatment SRT scores were found to be positively associated with greater likelihood of improvement in both tinnitus and sleep with use of melatonin ($p < 0.05$). Melatonin is associated with a statistically significant decrease in tinnitus intensity and improved sleep quality in patients with chronic tinnitus. Melatonin is most effective in men, those without a history of depression, those who have not undergone prior tinnitus treatments, those with more severe and bilateral tinnitus, and those with a history of noise exposure.

Subject: Adult; Aged; Aged, 80 and over; Central Nervous System Depressants: administration & dosage; *Central Nervous System Depressants: therapeutic use; Cross-Over Studies; Double-Blind Method; Female; Humans; Male; Melatonin: administration & dosage; *Melatonin: therapeutic use; Middle Aged; Prospective Studies; Sleep: drug effects; *Tinnitus: prevention & control

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Correspondence author: Hurtuk, Agnes

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Document 10 of 100

Prevalence of insomnia and impact on quality of life among community elderly subjects with tinnitus.

Author: Lasisi, Akeem O1; Gureje, Oye1 Department of Otorhinolaryngology, University of Ibadan, Ibadan, Nigeria.

Publication info: The Annals of otology, rhinology, and laryngology 120.4 (Apr 2011): 226-230.

[ProQuest document link](#)

Abstract: We sought to determine the prevalence of insomnia and its impact on the quality of life (QoL) among community elderly subjects (at least 65 years of age) with subjective tinnitus. After household selection with multistage stratified area probability sampling, face-to-face interviews were used to obtain self-reports of subjective tinnitus and insomnia, and QoL was assessed with the WHOQoL-Bref instrument. Among 1302 elderly subjects, there were 183 subjects (109 female and 74 male) with tinnitus. Among those with tinnitus, insomnia was encountered in 95 (51.9%) and was found to be significantly more common among those with tinnitus than among those without (378 of 1119, or 33.8%; $p = 0.002$). The insomnia symptoms included difficulty in maintaining sleep in 73.4% of subjects, difficulty in falling asleep in 70.0%, early morning wakefulness in 64.3%, nonrestorative sleep in 35.1%, and daytime sleepiness in 34.7%. Univariate analysis revealed difficulty with falling asleep ($p = 0.01$) and early morning wakefulness ($p = 0.05$) to be significantly associated with tinnitus among the symptoms. Student's t-test and logistic regression analysis revealed significant deterioration in the total QoL and in the physical, psychological, social, and environmental QoL domains among elderly subjects who had tinnitus with insomnia as compared with those without insomnia. We believe that insomnia is significantly more common among elderly subjects with tinnitus than among those without, and that its presence further depreciates the QoL in these elderly individuals.

Subject: Aged; Aged, 80 and over; Cohort Studies; Female; Humans; Logistic Models; Longitudinal Studies; Male; Nigeria: epidemiology; Prevalence; *Quality of Life; *Sleep Initiation and Maintenance Disorders: epidemiology; Sleep Initiation and Maintenance Disorders: psychology; *Tinnitus: epidemiology; Tinnitus: psychology; Wakefulness

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Identifier / keyword: National Library of Medicine

Supplemental data: Cites: *Depress Anxiety*. 2003; 18(4):163-76[14661186], Cites: *Arch Gerontol Geriatr*. 2003 Sep-Oct; 37(2):139-45[12888227], Cites: *J Am Geriatr Soc*. 2006 Nov; 54(11):1784-9[17087709], Cites: *Prog Brain Res*. 2007; 166:227-33[17956787], Cites: *Br J Audiol*. 1990 Feb; 24(1):51-62[2317601], Cites: *Br J Audiol*. 1989 Feb; 23(1):53-62[2784987], Cites: *Chest*. 1994 Jan; 105(1):151-4[8275723], Cites: *Biol Psychiatry*. 1993 Jul 1-15; 34(1-2):84-90[8373941], Cites: *Psychol Med*. 1998 May; 28(3):551-8[9626712], Cites: *J Speech Hear Disord*. 1983 May; 48(2):150-4[6621006], Cites: *Int Psychogeriatr*. 2002 Dec; 14(4):405-16[12670061], Cites: *Sleep Med*. 2002 Sep; 3(5):389-91[14592169], Cites: *Scand Audiol*. 1990; 19(4):245-9[2075417], Cites: *Audiology*. 1985; 24(3):195-206[4004646], Cites: *Int Psychogeriatr*. 2004 Jun; 16(2):159-73[15318762], Cites: *World J Biol Psychiatry*. 2000 Apr; 1(2):105-11[12607206], Cites: *Psychol Med*. 2002 Aug; 32(6):1021-8[12214783], Cites: *Otolaryngol Head Neck Surg*. 1984 Dec; 92(6):689-96[6440089], Cites: *Audiology*. 2000 Nov-Dec; 39(6):333-9[11766693], Cites: *J Fam Pract*. 2002 Mar; 51(3):229-35[11978233], Cites: *J Clin Endocrinol Metab*. 2001 Aug; 86(8):3787-94[11502812], Cites: *Am J Otolaryngol*. 2000 Sep-Oct; 21(5):287-93[11032291]

Correspondence author: Lasisi, Akeem O

Publication title: The Annals of otology, rhinology, and laryngology

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Document 11 of 100

Childhood hearing and its relationship with tinnitus at thirty-two years of age.

Author: Dawes, Patrick J D1; Welch, David1 Dept of Otorhinolaryngology-Head and Neck Surgery, Dunedin Hospital, 201 Great King St, Dunedin, New Zealand.

Publication info: The Annals of otology, rhinology, and laryngology 119.10 (Oct 2010): 672-676.

[ProQuest document link](#)

Abstract: Tinnitus is associated with hearing loss in adulthood, often resulting from noise or age, but it is not known whether children's hearing and/or middle ear health predispose them to tinnitus in adulthood. The participants were members of the Dunedin Multidisciplinary Health and Development Study, born in Dunedin, New Zealand, between April 1972 and March 1973. The base sample consisted of 1,037 children. Otitis media was assessed at 5, 7, and 9 years of age; audiometry and tympanometry findings were recorded at 11 years of age, and a detailed description of the tympanic membrane was made at 15 years of age. At 32 years of age, 970 of the 1,015 living study members (96%) answered questions about tinnitus. Children who had otitis media and a raised audiometric threshold went on to experience more tinnitus in adulthood than did those without middle ear disease or those who had otitis media without a raised threshold. In those who had recovered from otitis media, audiometric threshold elevation at lower

and higher frequencies was associated with experiencing tinnitus in adulthood. Neither childhood otitis media alone nor elevated thresholds alone predicted adult tinnitus. Childhood otitis media with an associated hearing loss in the low and high frequencies was associated with a greater probability of experiencing tinnitus in adulthood.

Subject: Acoustic Impedance Tests; Adolescent; Adult; Audiometry; Child; Child, Preschool; Humans; *Otitis Media: complications; Otitis Media: physiopathology; *Tinnitus: etiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Dawes, Patrick J D

Publication title: The Annals of otology, rhinology, and laryngology

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Database: ComDisDome

Document 12 of 100

Neural correlates of human somatosensory integration in tinnitus.

Author: Lanting, C P1; de Kleine, E; Eppinga, R N; van Dijk, P1 Department of Otorhinolaryngology/Head and Neck Surgery, University Medical Center Groningen, The Netherlands. cris@ihr.mrc.ac.uk

Publication info: Hearing research 267.1-2 (Aug 2010): 78-88.

[ProQuest document link](#)

Abstract: Possible neural correlates of somatosensory modulation of tinnitus were assessed. Functional magnetic resonance imaging (fMRI) was used to investigate differences in neural activity between subjects that can modulate their tinnitus by jaw protrusion and normal hearing controls. We measured responses to bilateral sound and responses to jaw protrusion. Additionally we studied multimodal integration of somatosensory jaw protrusion and sound. The auditory system responded to both sound and jaw protrusion. Jaw responses were enhanced in the cochlear nucleus (CN) and the inferior colliculus

(IC) in tinnitus patients. The responses of the auditory brain areas to jaw protrusion presumably account for the modulation of tinnitus as described by the patients. The somatosensory system responded to jaw protrusion and not to sound. These responses occurred both in subjects with tinnitus and controls. Unexpectedly, the cerebellum responded to sound in normal hearing subjects, but not in tinnitus patients. Together, these results provide a neurophysiological basis for the effect of jaw protrusion on tinnitus. Copyright 2010 Elsevier B.V. All rights reserved.

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Lanting, C P

Publication title: Hearing research

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Number of pages: 11

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Last updated: 2010-09-25

Database: ComDisDome

Document 13 of 100

Molecular aspects of tinnitus.

Publication info: Hearing research 266.1-2 (Jul 2010): 60-69.

[ProQuest document link](#)

Abstract: Molecular changes caused by sensory trauma and subsequent structural alterations of the central nervous system are only beginning to be identified. In most cases, the generation of tinnitus can be linked to damage of the peripheral auditory system, probably even in cases where hearing impairment cannot be assessed by audiometry. Within a common view, acoustic trauma and salicylate induce abnormal excitability at the level of the brainstem, subcortical and cortical level that may be related to tinnitus. The present review summarizes studies emphasizing a crucial role of molecular events that occur in the cochlea exhibiting the potential to alter the network activity in distinct areas of the brain, including the limbic system. We proceed from the inner ear to the auditory cortex and discuss the recent molecular

findings in the central auditory system as a secondary step of previous neuronal changes in the periphery.

Document 14 of 100

Effects of acoustical stimuli delivered through hearing aids on tinnitus.

Author: Sweetow, Robert W1; Sabes, Jennifer Henderson1 University of California, San Francisco, CA 94115, USA. Robert.Sweetow@ucsfmedctr.org

Publication info: Journal of the American Academy of Audiology 21.7 (Jul 2010): 461-473.

[ProQuest document link](#)

Abstract: The use of acoustic signals to mask, mix with, or ease the distress associated with tinnitus has been clinically employed for decades. It has been proposed that expanding acoustic options for tinnitus sufferers due to personal preferences is desirable. Fractal tones incorporate many useful characteristics of music while avoiding certain features that could be distracting to some individuals. To assess the effects on relaxation, tinnitus annoyance, tinnitus handicap, and tinnitus reaction from the use of a hearing aid that incorporates combinations of amplification, fractal tones, and white noise. Participants listened to experimental hearing aids containing several acoustic options and were asked to rate the signals in terms of their effect on relaxation and tinnitus annoyance. They subsequently wore the hearing aids for 6 mo and completed tinnitus handicap and reaction scales. Fourteen hearing-impaired adults with primary complaints of subjective tinnitus. Participants were tested wearing hearing aids containing several programs including amplification only, fractal tones only, and a combination of amplification, noise, and/or fractal tones. The fractal tones (now commercially available as the "Zen" feature) were generated by the Widex Mind hearing aid. Rating procedures were conducted in the laboratory, and tinnitus reaction and handicap were assessed during and following a 6 mo field trial. Data were collected at the initial visit, one week, 1 mo, 3 mo, and 6 mo. Nonparametric statistics included Wilcoxon matched-pairs signed-rank, chi(2), and repeated-measures analyses of variance. Thirteen of 14 participants reported that their tinnitus annoyance, as measured by the Tinnitus Annoyance Scale, was reduced for at least one of the amplified conditions (with or without fractal tones or noise), relative to the unaided condition. Nine assigned a lower tinnitus annoyance rating when listening to fractal tones alone versus the amplification-alone condition. There was a range of preferences observed for fractal settings, with most participants preferring fractals with a slow or medium tempo and restricted dynamic range. The majority (86%) indicated that it was easier to relax while listening to fractal signals. Participants had preferences for certain programs and fractal characteristics. Although seven participants rated the noise-only condition as providing the least tinnitus annoyance, only two opted to have noise only as a program during the field trial, and none selected the noise-only condition as the preferred setting. Furthermore, while all four of the experienced hearing aid users selected noise as producing the least annoying tinnitus in the laboratory, only one selected it for field wear. Tinnitus Handicap Inventory and Tinnitus Reaction Questionnaire scores were improved over the course of the 6 mo trial, with clinically significant improvements occurring for over half of the participants on at least one of the measures. The results suggest that use of acoustic stimuli, particularly fractal tones, delivered through hearing aids can provide amplification while allowing for relief for some tinnitus sufferers. It is important to recognize, however, that tinnitus management procedures need to be supplemented with appropriate counseling. American Academy of Audiology.

Subject: *Acoustic Stimulation: methods; Adult; Aged; Female; Fractals; *Hearing Aids; Hearing Loss: complications; Hearing Loss: therapy; Humans; Male; Middle Aged; Music; *Music Therapy: methods; Noise; Patient Satisfaction; Perceptual Masking; Psychoacoustics; Questionnaires; *Relaxation Therapy: methods; Tinnitus: complications; *Tinnitus: therapy

Record owner: National Library of Medicine

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Correspondence author: Sweetow, Robert W

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Database: ComDisDome

Document 15 of 100

Comparison of salicylate- and quinine-induced tinnitus in rats: development, time course, and evaluation of audiologic correlates.

Author: Ralli, Massimo¹; Lobarinas, Edward; Fetoni, Anna Rita; Stolzberg, Daniel; Paludetti, Gaetano; Salvi, Richard¹ Center for Hearing and Deafness, Department of Communicative Disorders and Sciences, University at Buffalo, Buffalo, New York, USA. massimoralli@mac.com

Publication info: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 31.5 (Jul 2010): 823-831.

[ProQuest document link](#)

Abstract: BACKGROUND: Salicylate and quinine have been shown to reliably induce short-term tinnitus when administered at high doses. The present study compared salicylate and quinine-induced tinnitus in rats using the gap prepulse inhibition of acoustic startle (GPIAS). METHODS: Twenty-four rats were divided into 2 groups; the first group (n = 12) was injected with salicylate (300 mg kg d), whereas the second (n = 12) was treated with quinine orally at a dose of 200 mg kg d. Animals were treated daily for 4 consecutive days. All rats were tested for tinnitus and hearing loss before and 2, 24, 48, 72, and 96 hours after the first drug administration. Tinnitus was assessed using GPIAS; hearing function was measured with distortion product otoacoustic emissions (DPOAEs) and auditory brainstem response. RESULTS: Salicylate treatment induced transient tinnitus with a pitch near 16 kHz starting 2 hours posttreatment, persisting over the 4-day treatment period and disappearing 24 hours later. Animals in the quinine group showed GPIAS changes at a higher pitch (20 kHz); however, changes were more variable among animals, and the mean data were not statistically significant. Hearing function varied across treatments. In the salicylate group, high-level DPOAEs were slightly affected; most changes occurred 2 hours posttreatment. Low-level DPOAEs were affected at all frequencies with a progressive dose-dependent effect. In the quinine group, only high-level DPOAEs were affected, mainly at 16 kHz. CONCLUSION: The present study highlights the similarities and differences in the frequency and the time course of tinnitus and hypoacusis induced by salicylate and quinine. Transient tinnitus was reliably induced pharmacologically with salicylate,

whereas hearing loss remained subclinical with only minor changes in DPOAEs.

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ralli, Massimo

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

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Database: ComDisDome

Document 16 of 100

Quantitative analysis of cochlear active mechanisms in tinnitus subjects with normal hearing sensitivity: multiparametric recording of evoked otoacoustic emissions and contralateral suppression.

Author: Paglialonga, Alessia¹; Del Bo, Luca; Ravazzani, Paolo; Tognola, Gabriella¹ Istituto di Ingegneria Biomedica, Consiglio Nazionale delle Ricerche, Piazza Leonardo da Vinci 32, Milan, Italy.
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Publication info: Auris, nasus, larynx 37.3 (Jun 2010): 291-298.

[ProQuest document link](#)

Abstract: OBJECTIVE: Aim of this study was to investigate the possible role played by outer hair cells and cochlear efferent system functionality when tinnitus develops in normal hearing ears. A multiparametric approach was used, entailing recording and analysis of a set of otoacoustic emissions (OAEs): distortion product (DPOAEs), transient evoked (TEOAEs) and efferent-mediated TEOAE suppression in the presence of contralateral acoustic stimulation (CAS). METHODS: Fifty-four subjects with normal hearing

sensitivity participated in the study. Twenty-three suffered from chronic subjective tinnitus whereas thirty-one did not have tinnitus and acted as control subjects. DPOAEs were measured with eliciting tones of frequency ratio 1.22 and intensity 65 and 55dB SPL in the frequency range 0.5-8kHz. TEOAEs were recorded with the 'linear' protocol using clicks at 60dB peak SPL both in the absence and in the presence of CAS at two different intensities. DPOAE amplitude, TEOAE amplitude, and TEOAE suppression were analysed as relevant parameters. RESULTS: Significantly reduced DPOAE amplitude in the frequency range 1.5-8kHz, lower TEOAE amplitude, and slightly decreased TEOAE suppression were measured in tinnitus subjects compared to non-tinnitus controls. In particular, 74% of tinnitus subjects exhibited abnormal DPOAEs, 13% had abnormal TEOAEs, whereas abnormal TEOAE suppression was found in 9% of patients. CONCLUSION: Overall, the present work revealed the presence of abnormal OAEs, in particular at higher frequencies, in tinnitus subjects with normal hearing sensitivity. A minor (i.e., sub-clinical) outer hair cell dysfunction, particularly in high-frequency cochlear regions, might thus be assumed in normal hearing tinnitus subjects. In order to better put in light the possible role played by outer hair cells in low-frequency cochlear regions, or by the cochlear efferent system, additional analyses would be needed. Copyright (c) 2009 Elsevier Ireland Ltd All rights reserved.

MeSH: Young Adult, Humans, Adult, Middle Aged, Hearing Loss, Sensorineural -- diagnosis, Hearing Loss, Sensorineural -- etiology, Tinnitus -- complications, Tinnitus -- pathology, Tinnitus -- physiopathology, Male, Female, Cochlea (major) -- pathology, Cochlea (major) -- physiopathology, Otoacoustic Emissions, Spontaneous (major) -- physiology, Evoked Potentials, Auditory (major) -- physiology

Record owner: National Library of Medicine

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Correspondence author: Paglialonga, Alessia

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Database: ComDisDome

Eye movement abnormalities in somatic tinnitus: fixation, smooth pursuit and optokinetic nystagmus.

Author: Kapoula, Z1; Yang, Q; Vernet, M; Bonfils, P; Londero, A1 Laboratoire IRIS, CNRS, FRE 3154, Service d'Ophtalmologie-ORL-Stomatologie, Hôpital Européen Georges Pompidou, 20 rue Leblanc, Paris, France. zoi.kapoula@egp.aphp.fr

Publication info: Auris, nasus, larynx 37.3 (Jun 2010): 314-321.

[ProQuest document link](#)

Abstract: OBJECTIVE: Smooth pursuit (SP), optokinetic nystagmus (OKN) and fixation were investigated in five subjects with somatic tinnitus modulated by eye movements, jaw or neck. METHODS: Eye movements were recorded with the EyeLink II video system. RESULTS: (1) Fixation was characterized by high frequency and amplitude of saccade intrusions; (2) SP had low gain particularly in the vertical direction, and it was characterized by high frequency of catch-up saccades with high amplitude, including predictive saccades; (3) OKN also had low gain particularly in the vertical direction. Each subject showed abnormality for more than one type of eye movement, and for specific directions. CONCLUSIONS AND SIGNIFICANCE: The results suggest mild dysfunction of cortical-subcortical and cerebellar structures involved in the control of these eye movements. Particularly deficits for vertical pursuit eye movements and fixation instability in line with cerebellar signs. Further studies of more patients with or without modulated tinnitus are in progress. Copyright (c) 2009 Elsevier Ireland Ltd. All rights reserved.

MeSH: Humans, Middle Aged, Pursuit, Smooth -- physiology, Male, Female, Eye Movements (major) -- physiology, Nystagmus, Optokinetic (major) -- physiology, Somatoform Disorders (major) -- epidemiology, Somatoform Disorders (major) -- physiopathology, Tinnitus (major) -- epidemiology, Tinnitus (major) -- physiopathology, Fixation, Ocular (major) -- physiology

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Correspondence author: Kapoula, Z

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Document 18 of 100

Incidence, persistence, and progression of tinnitus symptoms in older adults: the Blue Mountains Hearing Study.

Author: Gopinath, Bamini¹; McMahon, Catherine M; Rochtchina, Elena; Karpa, Michael J; Mitchell, Paul¹
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Publication info: Ear and hearing 31.3 (Jun 2010): 407-412.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** Temporal population-based data on tinnitus are lacking. We used a representative older population-based cohort to establish 5-yr incidence, persistence, and progression of tinnitus symptoms. **DESIGN:** Two thousand six participants of the Blue Mountains Hearing Study (1997-1999) had complete tinnitus data, and of these, 1214 participants were followed up at 5-yr examinations in 2002-2004. Presence of prolonged tinnitus was assessed by a positive response to a single question administered by an audiologist. Incident tinnitus was defined in participants who were free of tinnitus symptoms at the baseline study in 1997-1999 but who reported tinnitus symptoms at the 5-yr follow-up in 2002-2004. Progression of tinnitus was defined as the increase in annoyance of tinnitus symptoms from baseline to the 5-yr follow-up study. Persistence of tinnitus symptoms was defined as the presence of tinnitus symptoms at both the baseline and follow-up examinations. Hearing impairment was measured as the pure-tone average (PTA) of audiometric hearing thresholds at 500, 1000, 2000, and 4000 Hz (PTA0.5-4 kHz), defining bilateral hearing loss as PTA0.5-4 kHz >25 dB HL. **RESULTS:** Five-year incidence of tinnitus was 18.0%. A significant age trend was observed for the 5-yr incidence ($p = 0.005$), with incident tinnitus decreasing with age. Hearing loss increased the risk of developing incident tinnitus, age-sex adjusted odds ratio 2.13 (95% confidence interval, 1.40 to 3.24). Most (55.5%) incident tinnitus cases reported symptoms that were only mildly annoying. Tinnitus at baseline persisted in 81.6% of participants. Of those reporting mildly annoying tinnitus at baseline, 39.6% progressed to moderately annoying and 5.9% to severely annoying tinnitus. At the follow-up, a higher frequency of participants with persistent tinnitus (old cases) reported their symptoms as very/extremely annoying compared with the new (incident) cases of tinnitus ($p = 0.01$). A high proportion (85.2%) of subjects receiving tinnitus treatment (mainly medications and hearing aid) at baseline still reported tinnitus at 5-yr examinations. **CONCLUSIONS:** Incident tinnitus was frequent, with nearly one in five older adults suffering from this condition after 5 yrs. Tinnitus symptoms persisted in more than three-quarters of the cohort, during the 5 yrs. Longitudinal data are an important contribution to the research evidence base to support timely intervention and effective management of this frequent symptom.

MeSH: Severity of Illness Index, Young Adult, Evidence-Based Medicine, Audiometry, Pure-Tone, Auditory Threshold, Humans, Disease Progression, Aged, Longitudinal Studies, Aged, 80 and over, Risk Factors, Adult, Incidence, Middle Aged, Australia -- epidemiology, Chronic Disease, Follow-Up Studies, Male, Female, Tinnitus (major) -- epidemiology, Tinnitus (major) -- physiopathology, Tinnitus (major) -- therapy, Health Surveys (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Gopinath, Bamini

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Last updated: 2010-09-25

Database: ComDisDome

Document 19 of 100

Tinnitus onset rates from chemotherapeutic agents and ototoxic antibiotics: results of a large prospective study.

Author: Dille, Marilyn F1; Konrad-Martin, Dawn; Gallun, Frederick; Helt, Wendy J; Gordon, Jane S; Reavis, Kelly M; Bratt, Gene W; Fausti, Stephen A1 VA RR & D National Center for Rehabilitative Auditory Research, Portland VA Medical Center, Portland, OR 97239, USA. marilyn.dille@va.gov

Publication info: Journal of the American Academy of Audiology 21.6 (Jun 2010): 409-417.

[ProQuest document link](#)

Abstract: To report on the incidence and relative risk of tinnitus onset from a variety of drug therapies known to be ototoxic. Two main questions were asked: (1) What is the prevalence and incidence of tinnitus among patients treated with cisplatin, carboplatin, or ototoxic antibiotic therapies? (2) Do commonly reported treatment or subject factors confound or modify the incidence of tinnitus onset? A prospective observational study design was used to evaluate occurrence of significant otologic changes in 488 veterans (962 ears) receiving chemotherapeutic agents (cisplatin, carboplatin), ototoxic antibiotics (primarily aminoglycoside), or nonototoxic drugs (control medications). A subset of 260 veterans lacking tinnitus prior to drug exposure was used to compare rates of tinnitus onset. Subjects were tested prior to, during, and following their treatment. Planned comparisons using logistic regression, analysis of variance (ANOVA), and chi(2) statistics were made among groups by the type of medication taken, age, presence of preexisting hearing loss, days on drug, and cumulative dose of drug. Baseline tinnitus rates were high (nearly 47%) relative to the general population of a similar age. Subjects with exposure to ototoxic medications had significantly increased risk for developing tinnitus. Those on chemotherapeutic agents were found to have the greatest risk. Cisplatin elevated the risk by 5.53 times while carboplatin increased the risk by 3.75 over nonototoxic control medications. Ototoxic antibiotics resulted in borderline risk (2.81) for new tinnitus. Contrary to other reports, we did not find that subject factors (increased age or pre-existing hearing loss) or treatment factors (days on drug or cumulative dose) contributed to rates of tinnitus onset during treatment. This large prospective study confirms that new tinnitus during treatment is associated with chemotherapy and with certain ototoxic antibiotic treatment. Cisplatin and carboplatin were found to be the most potent ototoxic agents causing tinnitus at much greater numbers than the other drugs studied. Implications for counseling and audiological resource allocation are discussed. American

Academy of Audiology.

Subject: Adult; Aged; Amikacin: toxicity; *Aminoglycosides: toxicity; *Anti-Bacterial Agents: toxicity; *Antineoplastic Agents: toxicity; Bacterial Infections: drug therapy; *Carboplatin: toxicity; *Cisplatin: toxicity; Cross-Sectional Studies; Female; Gentamicins: toxicity; Hearing Tests; Humans; Incidence; Male; Middle Aged; Neoplasms: drug therapy; Prospective Studies; Risk; Time Factors; *Tinnitus: chemically induced; Tinnitus: epidemiology; Tobramycin: toxicity; Vancomycin: toxicity; *Veterans: statistics & numerical data

Record owner: National Library of Medicine

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Correspondence author: Dille, Marilyn F

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Last updated: 2012-07-13

Database: ComDisDome

Document 20 of 100

Test-retest tinnitus characteristics in patients with noise-induced hearing loss.

Author: Nageris, Ben I1; Attias, Joseph; Raveh, Eyal1 Department of Otolaryngology-Head and Neck Surgery, Rabin Medical Center, Petah Tiqwa, Israel. bennyn@clalit.org.il

Publication info: American journal of otolaryngology 31.3 (May 2010): 181-184.

[ProQuest document link](#)

Abstract: PURPOSE: The purpose of the study was to examine the test-retest value of tinnitus pitch and loudness in patients with tinnitus and noise-induced hearing loss (NIHL). MATERIALS AND METHODS: The study sample consisted of 30 patients of mean age 35 +/- 6.7 years with long-standing tinnitus and hearing loss due to exposure to noise during military service. Ten patients had unilateral tinnitus, and 20

had bilateral tinnitus. All presented with a typical NIHL audiogram on the affected side(s). None of the patients was receiving drug therapy. **RESULTS:** There was no statistically significant difference in tinnitus pitch or loudness between the 2 tests for the whole group and separately in patients with unilateral or bilateral tinnitus. **CONCLUSION:** Subjective testing of pitch and loudness of tinnitus secondary to NIHL is accurate and reproducible, making it a valuable tool for diagnosis and follow-up. The lack of differences between patients with unilateral or bilateral tinnitus indicates that both types may be managed in a similar manner. Copyright (c) 2010 Elsevier Inc. All rights reserved.

MeSH: Severity of Illness Index, Reproducibility of Results, Auditory Threshold -- physiology, Humans, Pitch Perception -- physiology, Hearing Loss, Noise-Induced -- diagnosis, Hearing Loss, Noise-Induced -- etiology, Hearing Loss, Noise-Induced -- physiopathology, Military Personnel, Adult, Hearing Tests, Loudness Perception -- physiology, Middle Aged, Female, Male, Tinnitus (major) -- etiology, Tinnitus (major) -- physiopathology, Noise, Occupational (major) -- adverse effects

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Nageris, Ben I

Publication title: American journal of otolaryngology

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Accession number: pmid-20015738

ProQuest document ID: 742784040

Document URL: <http://search.proquest.com/docview/742784040?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 21 of 100

Neuro-otological findings in tinnitus patients with normal hearing.

Author: Morales-Garcia, C1; Quiroz, G; Matamala, J M; Tapia, C1 Department of Neuro-Otology, University of Chile School of Medicine, Salvador Hospital, Santiago, Chile. cvmoralesg@vtr.net

Publication info: The Journal of laryngology and otology 124.5 (May 2010): 474-476.

[ProQuest document link](#)

Abstract: INTRODUCTION: Tinnitus is usually associated with hearing loss, and patients with tinnitus and normal hearing are unusual. Neuro-otological findings have not previously been described in tinnitus patients with normal hearing. Aim: To analyse neuro-otological examination results from a group of tinnitus patients with normal hearing. MATERIALS AND METHODS: Seventeen normal-hearing tinnitus patients seen over a 10-year period were retrospectively evaluated. Their results were compared with those of a control group of 17 normal subjects without tinnitus. RESULTS: The main neuro-otological finding in the tinnitus patients was caloric test abnormality: a unilateral canal paresis was present in 15 of the 17 patients. Caloric tests were normal in 15 of the 17 control subjects. CONCLUSION: We may infer from these results that tinnitus could be the only clinical manifestation of a cochlear - and presumably cochleo-vestibular - lesion, and that unilateral canal paresis may be the only abnormal finding on neuro-otological examination.

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Morales-Garcia, C

Publication title: The Journal of laryngology and otology

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Publication year: 2010

Year: 2010

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Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Journal Article

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Accession number: pmid-20003596

ProQuest document ID: 742783562

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Last updated: 2010-08-14

Database: ComDisDome

Document 22 of 100

A novel surgical technique for management of tinnitus due to high dehiscent jugular bulb.

Author: El-Beghermy, Mohamed A1; Rabie, Amr N1 Otolaryngology Department, Ain Shams University, Cairo, Egypt.

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 142.4 (Apr 2010): 576-581.

[ProQuest document link](#)

Abstract: OBJECTIVES: To assess the effectiveness of middle ear floor reconstruction in management of vascular tinnitus due to high jugular bulb with dehiscence middle ear floor. STUDY DESIGN: Case series with chart review. SETTING: Tertiary academic medical center. SUBJECTS AND METHODS: We reviewed the medical records of seven patients with high dehiscence jugular bulb, presenting with incapacitating pulsatile roaring tinnitus that was abolished by digital compression of the ipsilateral jugular vein, from January 2002 to December 2006. The diagnosis was confirmed by CT scan of the temporal bone (bone window, coronal views). The seven patients were surgically explored, five under local anesthesia (to monitor the results with possible intraoperative revision) and two under general endotracheal anesthesia, for middle ear floor reconstruction that was done using bone dust, perichondrium, and tragal cartilage (mean follow-up 28 months). RESULTS: Of the seven patients, tinnitus disappeared in four (57%) and decreased in one. The overall improvement was five of seven (71%). One patient had postoperative increased intracranial pressure. CONCLUSION: The preliminary results suggest that surgical reconstruction of the middle ear floor under local anesthesia offers valuable treatment for patients with incapacitating tinnitus due to dehiscence middle ear floor. However, the risk of sigmoid sinus thrombosis should be considered. To our knowledge, this is the first trial of multilayer reconstruction of the middle ear floor dehiscence to manage high jugular bulb causing tinnitus. Copyright 2010 American Academy of Otolaryngology-Head and Neck Surgery Foundation. Published by Mosby, Inc. All rights reserved.

MeSH: Humans, Adult, Treatment Outcome, Otorhinolaryngologic Surgical Procedures -- methods, Male, Female, Jugular Veins (major) -- abnormalities, Ear, Middle (major) -- surgery, Tinnitus (major) -- etiology, Tinnitus (major) -- surgery

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: El-Begermy, Mohamed A

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Document URL: <http://search.proquest.com/docview/742784591?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 23 of 100

Worldwide experience with sequential phase-shift sound cancellation treatment of predominant tone tinnitus.

Author: Choy, D S1; Lipman, R A; Tassi, G P1 Tinnitus Control Center, New York, USA.

Publication info: The Journal of laryngology and otology 124.4 (Apr 2010): 366-369.

[ProQuest document link](#)

Abstract: OBJECTIVE:To report clinical data from six centres in the US, Western Europe and Asia which have used phase-shift sound wave cancellation for treatment of predominant tone tinnitus, from the first treatment in 2000 to 2009. METHOD:Clinical data were obtained from New York City, London, Erie (Pennsylvania, USA), Antwerp, Grottamare (Italy) and Kuala Lumpur, and summarised. RESULTS:A total of 493 patients were treated. A reduction in tinnitus volume (defined as > or =6 dB) was seen in 49-72 per cent of patients.

MeSH: Prospective Studies, Humans, Adult, Aged, Middle Aged, Acoustic Stimulation -- instrumentation, Acoustic Stimulation -- methods, Male, Female, Sound (major), Tinnitus (major) -- therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Choy, D S

Publication title: The Journal of laryngology and otology

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Number of pages: 4

Publication year: 2010

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ProQuest document ID: 742782283

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Last updated: 2010-09-25

Database: ComDisDome

Document 24 of 100

The relationship between tinnitus pitch and the edge frequency of the audiogram in individuals with hearing impairment and tonal tinnitus.

Author: Moore, Brian C J1; Vinay; Sandhya1 Department of Experimental Psychology, Cambridge University, Downing Street, Cambridge CB23EB, UK. bcjm@cam.ac.uk

Publication info: Hearing research 261.1-2 (Mar 2010): 51-56.

[ProQuest document link](#)

Abstract: Some theories of mechanisms of tinnitus generation lead to the prediction that the pitch associated with tonal tinnitus should be related to the "edge frequency" of the audiogram, $f(e)$, the frequency at which hearing loss worsens relatively abruptly. However, previous studies testing this prediction have provided little or no support for it. Here, we reexamined the relationship between tinnitus pitch and $f(e)$, using 11 subjects selected to have mild-to-moderate hearing loss and tonal tinnitus. Subjects were asked to compare the pitch of their tinnitus to that of a sinusoidal tone whose frequency and level were adjusted by the experimenter. Prior to testing in the main experiment, subjects were given specific training to help them to avoid octave errors in their pitch matches. Pitch matches made after this training were generally lower in frequency than matches made before such training, often by one or two octaves. The matches following training were highly reproducible. A clear relationship was found between the values of $f(e)$ and the mean pitch matches following training; the correlation was 0.94. Generally, the pitch matches were close in value to the values of $f(e)$. 2010 Elsevier B.V. All rights reserved.

MeSH: Cochlea -- physiopathology, Audiometry, Auditory Threshold -- physiology, Humans, Aged, Adult, Middle Aged, Female, Male, Auditory Pathways (major) -- physiopathology, Pitch Discrimination (major) -- physiology, Tinnitus (major) -- physiopathology, Sound (major), Hearing Loss (major) -- physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Moore, Brian C J

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Database: ComDisDome

Document 25 of 100

Head rotation evoked tinnitus due to superior semicircular canal dehiscence.

Author: Nam, E-C1; Lewis, R; Nakajima, H H; Merchant, S N; Levine, R A1 Department of Otolaryngology, School of Medicine, Kangwon National University, Chunchon, South Korea.

Publication info: The Journal of laryngology and otology 124.3 (Mar 2010): 333-335.

[ProQuest document link](#)

Abstract: INTRODUCTION: Superior semicircular canal dehiscence affects the auditory and vestibular systems due to a partial defect in the canal's bony wall. In most cases, sound- and pressure-induced vertigo are present, and are sometimes accompanied by pulse-synchronous tinnitus. CASE PRESENTATION: We describe a 50-year-old man with superior semicircular canal dehiscence whose only complaints were head rotation induced tinnitus and autophony. Head rotation in the plane of the right semicircular canal with an angular velocity exceeding 600 degrees/second repeatedly induced a 'cricket' sound in the patient's right ear. High resolution temporal bone computed tomography changes, and an elevated umbo velocity, supported the diagnosis of superior semicircular canal dehiscence. CONCLUSION: In addition to pulse-synchronous or continuous tinnitus, head rotation induced tinnitus can be the only presenting symptom of superior semicircular canal dehiscence without vestibular complaints. We suggest that, in our patient, the bony defect of the superior semicircular canal ('third window') might have enhanced the flow of inner ear fluid, possibly producing tinnitus.

MeSH: Head, Humans, Tomography, X-Ray Computed, Hearing Loss, Conductive -- diagnosis, Hearing Loss, Sensorineural -- diagnosis, Bone Conduction -- physiology, Hearing Tests, Middle Aged, Temporal Bone -- radiography, Male, Tinnitus (major) -- etiology, Semicircular Canals (major) -- pathology, Semicircular Canals (major) -- radiography, Rotation (major) -- adverse effects, Labyrinthine Fluids (major) -- physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Nam, E-C

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Report number: NIHMS149723, PMC2822878

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ProQuest document ID: 742787229

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Last updated: 2010-09-25

Database: ComDisDome

Document 26 of 100

Low heritability of tinnitus: results from the second Nord-Trøndelag health study.

Author: Kvestad, Ellen1; Czajkowski, Nikolai; Engdahl, Bo; Hoffman, Howard J; Tambs, Kristian1
Norwegian Institute of Public Health, Oslo, Norway. ellen.kvestad@fhi.no

Publication info: Archives of otolaryngology--head & neck surgery 136.2 (Feb 2010): 178-182.

[ProQuest document link](#)

Abstract: OBJECTIVE: To estimate the heritability of tinnitus. DESIGN: Self-report questionnaire data collected from August 1, 1995, through June 30, 1997, from individuals in the Nord-Trøndelag Hearing Loss Study (an integrated part of the Nord-Trøndelag Health Study) were used. The study also included information on first-degree family relationships, and age-corrected polychoric correlations of relatives' tinnitus status were calculated. A structural equation model was fit to the data, and the relative contributions of genes and unique environmental effects were estimated. Models that included sex-specific effects were also tested. SETTING: Nord-Trøndelag County, Norway. PATIENTS: A population-based sample of 12 940 spouses, 27 607 parent-offspring, and 11 498 siblings was used. A total of 28 066 respondents were tested twice, yielding a test-retest correlation of 0.65 for the report of tinnitus. MAIN OUTCOME MEASURE: Heritability of tinnitus. RESULTS: Correlations for parent-offspring ranged from 0.01 to 0.07 for the various sex combinations, sibling correlation ranged from 0.06 to 0.14, and the spouse correlation was 0.04. This family correlation pattern implies an upper limit for heritability of 0.11 with no sex differences in the heritability estimates. CONCLUSIONS: This is the first large population-based family study, to our knowledge, to report on the heritability of tinnitus. In contrast to previous speculations in the literature, this low heritability indicates that additive genetic effects explain only a small proportion of the variance of tinnitus in the population.

MeSH: Young Adult, Humans, Aged, Nuclear Family, Aged, 80 and over, Adult, Middle Aged, Genetic Predisposition to Disease, Norway, Female, Male, Models, Theoretical, Questionnaires (major), Tinnitus (major) -- genetics

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kvestad, Ellen

Publication title: Archives of otolaryngology--head & neck surgery

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Number of pages: 5

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Document type: Journal Article, Research Support, N.I.H., Extramural

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Last updated: 2010-09-25

Database: ComDisDome

Document 27 of 100

DPOAE in estimation of the function of the cochlea in tinnitus patients with normal hearing.

Author: Sztuka, Aleksandra¹; Pospiech, Lucyna; Gawron, Wojciech; Dudek, Krzysztof¹ Wroclaw Medical University, ENT Department, Borowska 213, Wroclaw, Poland.

Publication info: Auris, nasus, larynx 37.1 (Feb 2010): 55-60.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** The most probable place generating tinnitus in the auditory pathway is the outer hair cells (OHCs) inside the cochlea. Otoacoustic emissions are used to assess their activity. The objective of the investigation was to measure the features of distortion product otoacoustic emissions (DPOAE) in a group of tinnitus patients without hearing loss, estimate the diagnostic value of the parameters for the analysis of cochlear function in the patients, emphasizing those most useful in localizing tinnitus generators, and determine the hypothetical influence of hyperacusis and misophony on DPOAE parameters in tinnitus patients. **PATIENTS AND METHODS:** The material consisted of 44 patients with tinnitus and without hearing loss. In the control group were 33 patients without tinnitus with the same state of hearing. The tinnitus patients were divided into three subgroups: those with hyperacusis, those with misophonia, and those with neither. After collecting medical history and performing clinical examination of all the patients, tonal and impedance audiometry, ABR, and discomfort level were evaluated. Then DPOAE were measured using three procedures. First the amplitudes of two points per octave were assessed, second the "fine structure" method with 16-20 points per octave ($f_2/f_1=1.22$, $L_1=L_2=70$ dB), and the third procedure included recording the growth function in three series for input tones of $f_2=2002$, 4004, and 6006Hz ($f_2/f_1=1.22$) and $L_1=L_2$ levels increasing by increments of 5 dB in each series. **RESULTS AND CONCLUSIONS:** Hyperacusis was found in 63% and misophonia in 10% of the tinnitus patients with no hearing loss. DPOAE amplitudes in recordings with two points per octave and the fine structure method are very valuable parameters for estimating cochlear function in tinnitus patients with normal hearing. Function growth rate cannot be the only parameter in measuring DPOAE in tinnitus patients, including subjects with hyperacusis and misophonia. The markedly higher DPOAE amplitudes in the group of tinnitus patients without hearing loss suggest that tinnitus may be caused by increased motility of the OHCs induced by decreasing efferent fiber activity, and not by OHC failure. Hyperacusis significantly increases the amplitude of DPOAE in tinnitus patients with no hearing loss. Copyright (c) 2009 Elsevier Ireland Ltd. All rights reserved.

MeSH: Audiometry, Pure-Tone, Humans, Adult, Hyperacusis -- diagnosis, Hyperacusis -- physiopathology, Hair Cells, Auditory, Outer -- pathology, Tinnitus -- pathology, Tinnitus -- physiopathology, Male, Female, Cochlea (major) -- physiopathology, Otoacoustic Emissions, Spontaneous (major) -- physiology, Hearing (major) -- physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Sztuka, Aleksandra

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Last updated: 2010-09-25

Database: ComDisDome

Document 28 of 100

Tinnitus as a prognostic factor of sudden deafness.

Author: Hikita-Watanabe, Noriko¹; Kitahara, Tadashi; Horii, Arata; Kawashima, Takayuki; Doi, Katsumi; Okumura, Shin-Ichi¹ Department of Otolaryngology, Tondabayashi Hospital, Osaka, Japan.

Publication info: Acta oto-laryngologica 130.1 (2010): 79-83.

[ProQuest document link](#)

Abstract: CONCLUSIONS: The 'tinnitus-rare' group had a poorer prognosis for hearing than the 'tinnitus-often' group in all sudden sensorineural hearing loss (SSNHL), although the 'shorter duration' group had better prognosis than the 'longer duration' when restricted to SSNHL accompanied by tinnitus. This indicates that tinnitus itself may not be a sign for poor hearing prognosis but might be an essential sound for the initiation of repair of a damaged auditory system. OBJECTIVES: We examined the hearing improvement rate (HIR) and tinnitus at the onset of SSNHL to elucidate the prognostic value of tinnitus accompanying SSNHL. PATIENTS AND METHODS: Fifty patients with SSNHL were treated with systemic administration of steroids. Hearing recovery was determined by comparing the hearing levels before and after treatment. Tinnitus was subjectively evaluated by the tinnitus scoring questionnaire. The score for the five-step evaluation of the subjective tinnitus feelings 'loudness', 'duration' and 'annoyance' was obtained at the onset. RESULTS: In terms of 'duration', when we divided all the cases into 'tinnitus-rare' group and 'tinnitus-often' group, HIR in the 'tinnitus-rare' group was significantly lower than that in 'tinnitus-often' group. When restricted to the 'tinnitus-often' group, HIR for 'shorter duration' was significantly higher than that for 'longer duration'.

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Hikita-Watanabe, Noriko

Publication title: Acta oto-laryngologica

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Document 29 of 100

A critical evaluation of Web sites offering patient information on tinnitus.

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Publication info: Ear, nose, & throat journal 89.1 (Jan 2010): E11-E14.

[ProQuest document link](#)

Abstract: The Internet is a vast information resource for both patients and healthcare professionals. However, the quality and content often lack formal scrutiny, so we examined the quality of patient information regarding tinnitus on the Internet. Using the three most popular search engines ([google.com](http://www.google.com), [yahoo.com](http://www.yahoo.com), and [msn.com](http://www.msn.com)), we found pertinent Web sites using the search term tinnitus. Web sites' accountability and authorship were evaluated using previously published criteria. The quality of patient information about tinnitus was assessed using a new 10-point scale, the Tinnitus Information Value (TIV). Statistical analysis was performed using the independent sample t-test (p

MeSH: Humans, Patient Education as Topic (major), Information Dissemination (major), Tinnitus (major), Internet (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kieran, Stephen M

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Database: ComDisDome

Document 30 of 100

The impact of Type D personality on health-related quality of life in tinnitus patients is mainly mediated by anxiety and depression.

Author: Bartels, Hilke¹; Pedersen, Susanne S; van der Laan, Bernard F A M; Staal, Michiel J; Albers, Frans W J; Middel, Berrie¹ Department of Otorhinolaryngology, University Medical Center, University of Groningen, Groningen, The Netherlands. h.bartels@kno.umcg.nl

Publication info: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology 31.1 (Jan 2010): 11-18.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** To evaluate the impact of Type D personality on health-related quality of life (HRQoL) and self-reported tinnitus-related distress in chronic tinnitus patients and whether this relationship is mediated by indicators of psychological distress (i.e., vital exhaustion, anxiety, and depression). **MATERIALS AND METHODS:** Using a cross-sectional study design, 265 consecutive tinnitus patients were asked to complete the Hospital Anxiety and Depression Scale, the Maastricht Questionnaire, the Type D Scale (DS14), the Short-Form Health Survey 36, and the Tinnitus Reaction Questionnaire. **RESULTS:** The prevalence of Type D was 35.5%. Type D patients were significantly more anxious, depressed, and vitally exhausted, and experienced more impaired HRQoL and increased tinnitus-related distress compared with non-Type D patients. Structural equation modeling showed that Type D personality directly increased symptoms of depression and anxiety, but not vital exhaustion. Type D was also a direct predictor of poor mental and physical HRQoL and increased tinnitus-related distress, although this

influence was mainly mediated by symptoms of depression and anxiety. Anxiety, depression, and vital exhaustion had a direct influence on HRQoL and self-reported tinnitus-related distress, with a higher impact on mental HRQoL ($R^2 = 0.74$) compared with physical HRQoL ($R^2 = 0.33$). Vital exhaustion was a predictor of HRQoL and self-reported tinnitus-related distress; however, its influence was moderated by enhanced levels of anxiety and depression. **CONCLUSION:** Tinnitus patients with a Type D personality were more likely to be anxious and depressed and to experience poor HRQoL and increased self-reported tinnitus-related distress, with the impact of Type D mainly being mediated by symptoms of anxiety and depression, although Type D also exerted a direct influence on these outcomes. These findings underline that to reduce the impact of tinnitus on HRQoL and self-reported tinnitus-related distress, treatment should be directed toward reducing anxiety and depression, especially in patients with a Type D personality.

MeSH: Models, Psychological, Questionnaires, Fatigue -- psychology, Chi-Square Distribution, Humans, Aged, Cross-Sectional Studies, Psychiatric Status Rating Scales, Aged, 80 and over, Adult, Middle Aged, Chronic Disease, Personality Assessment, Female, Male, Depression (major) -- psychology, Anxiety (major) -- psychology, Health Status (major), Personality (major), Quality of Life (major) -- psychology, Tinnitus (major) -- psychology

Record owner: National Library of Medicine

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Correspondence author: Bartels, Hilke

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Database: ComDisDome

Document 31 of 100

Significance of serotonin transporter gene polymorphism in tinnitus.

Author: Deniz, Murat1; Bayazit, Yildirim A; Celenk, Fatih; Karabulut, Hayriye; Yilmaz, Akin; Gunduz, Bulent; Saridogan, Cagil; Dagli, Muharrerm; Erdal, Emin; Menevse, Adnan1 Department of Audiology, Faculty of Medicine, Gazi University, Besevler, Ankara, Turkey.

Publication info: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 31.1 (Jan 2010): 19-24.

[ProQuest document link](#)

Abstract: OBJECTIVES: To assess the role of serotonin transporter gene (SLC6A4) polymorphism in tinnitus. MATERIALS AND METHODS: Fifty-four consecutive patients experiencing subjective tinnitus and 174 healthy controls were allocated for the study. Psychoacoustic parameters of tinnitus were measured. Beck Depression Inventory was used to assess the depression level of the patients. Tinnitus Handicap Inventory was used to assess the severity of tinnitus. A visual analog scale was designed to measure the impact of tinnitus on quality of life of the patients. The 44-bp insertion-deletion in the promoter region (5-HTTLPR) and 17-bp variable number tandem repeats in the second intron of the serotonin transporter gene were assessed. RESULTS: No difference was found between the genotypes and allele frequencies of the patients and controls regarding variable number tandem repeats and 5-HTTLPR polymorphisms ($p > 0.05$). There was no association between the psychoacoustic parameters of tinnitus and SLC6A4 polymorphism ($p > 0.05$). There was a significant association between the 5-HTTLPR polymorphism and scores from the visual analog scale of the patients ($p < 0.05$). CONCLUSION: Generation of tinnitus signal is not associated with SLC6A4 polymorphism and possibly with serotonergic mechanisms. However, the "ll" genotype variant of the SLC6A4 polymorphic promoter region seems associated with the limbic and autonomic nervous system symptoms of the patients with tinnitus. Therefore, serotonergic mechanisms may help explain the neurophysiological model of tinnitus, and serotonin replacement or serotonin reuptake inhibitors may increase the success rate of tinnitus treatment modalities based on the neurophysiologic model of tinnitus.

MeSH: Severity of Illness Index, Analysis of Variance, Gene Frequency, Audiometry, Pure-Tone, Trinucleotide Repeats -- genetics, Chi-Square Distribution, Humans, Quality of Life, Patient Selection, Polymerase Chain Reaction, Alleles, Psychiatric Status Rating Scales, Adult, Middle Aged, Female, Male, Polymorphism, Single Nucleotide (major) -- genetics, Tinnitus (major) -- genetics, Serotonin (major) -- genetics, Serotonin Plasma Membrane Transport Proteins (major) -- genetics, Genetic Predisposition to Disease (major) -- genetics

Record owner: National Library of Medicine

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Correspondence author: Deniz, Murat

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Database: ComDisDome

Document 32 of 100

Measuring tinnitus loudness using constrained psychophysical scaling.

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Publication info: American journal of audiology 18.2 (Dec 2009): 119-128.

[ProQuest document link](#)

Abstract: PURPOSE: We measured tinnitus loudness using a new method of psychophysical scaling with the aim of introducing a potentially useful new procedure to the literature. METHOD: Fourteen adults reporting tinnitus were trained to use a standardized loudness scale, and then they used that response scale to assess loudness of nonstandard stimuli and of their tinnitus. We also measured tinnitus loudness and pitch using a computer-based matching procedure, and we measured the impact of tinnitus on daily living using the Tinnitus Handicap Inventory (THI; C. W. Newman, G. P. Jacobson, & J. B. Spitzer, 1996) for those 14 individuals and an additional 2 participants. Results and Conclusions Our 14 trained participants judged loudness similarly to normal hearing participants for pure tones at normal hearing, nontinnitus frequencies-implying that their judgments of tinnitus loudness were valid. Constrained scaling of tinnitus loudness yielded measurements that were substantially greater than the sensation level of sounds matched to tinnitus loudness. Our total of 16 participants fell into 2 groups on the basis of hearing loss, extent of abnormal loudness growth at the tinnitus frequency, and several aspects of tinnitus experience. Finally, as previously found, there was little correlation between tinnitus loudness, no matter how measured, and the impact of tinnitus on daily life as measured by the THI.

MeSH: Audiometry, Humans, Diagnosis, Computer-Assisted, Pitch Perception, Aged, Tinnitus -- complications, Tinnitus -- diagnosis, Tinnitus -- psychology, Aged, 80 and over, Adult, Middle Aged, Hearing Loss -- complications, Hearing Loss -- diagnosis, Female, Male, Psychophysics (major) -- methods, Loudness Perception (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ward, Lawrence M

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Last updated: 2010-09-25

Database: ComDisDome

Document 33 of 100

Changes in the tinnitus handicap questionnaire after cochlear implantation.

Author: Pan, Tao¹; Tyler, Richard S; Ji, Haihong; Coelho, Claudia; Gehringer, Anne K; Gogel, Stephanie
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Publication info: American journal of audiology 18.2 (Dec 2009): 144-151.

[ProQuest document link](#)

Abstract: **PURPOSE:** To determine (a) changes in the Tinnitus Handicap Questionnaire (THQ) for patients using cochlear implants, (b) differences between patients who receive total or partial relief, and (c) identifiable characteristics of those who report tinnitus after implantation. **METHOD:** Pre- and postoperatively, 244 adults were administered the THQ when they reported tinnitus. **RESULTS:** Of the 153 patients who had tinnitus preoperatively, 94 (61%) patients reported total suppression and 59 (39%) reported a partial reduction. In 91 patients who did not have tinnitus before implantation, 11 (12%) reported tinnitus postimplantation. The THQ score decreased from 41% preimplant to 30% postimplant. The largest reductions involved social handicap and hearing. Patients with a more severe hearing loss might be more likely to experience an exacerbation of their tinnitus. We were not able to clearly identify differences between patients who received total or partial relief and the characteristics of patients who reported tinnitus after implantation. Those who acquired tinnitus had the shortest duration hearing loss (5.6 years) and were the oldest (63 years). The average THQ score of patients getting tinnitus was 29%. **CONCLUSIONS:** Most tinnitus patients benefit from receiving a cochlear implant.

MeSH: Young Adult, Cochlear Implantation -- adverse effects, Humans, Aged, Postoperative Period, Aged, 80 and over, Adult, Treatment Outcome, Middle Aged, Adolescent, Female, Male, Questionnaires (major), Tinnitus (major) -- physiopathology, Tinnitus (major) -- surgery, Disabled Persons (major)

Record owner: National Library of Medicine

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Document 34 of 100

Evaluation of tinnitus patients with normal hearing sensitivity using TEOAEs and TEN test.

Author: Thabet, Elsaeid Mohamed11 ENT - HNS Dept., Mansoura College of Medicine, Mansoura University, 29 Bank Misr St., Mansoura, Egypt. elsaeid@mans.edu.eg

Publication info: Auris, nasus, larynx 36.6 (Dec 2009): 633-636.

[ProQuest document link](#)

Abstract: OBJECTIVES: This study was designed to investigate the possibility of underlying cochlear damage whether outer hair cells (OHCs) or inner hair cells (IHCs) in tinnitus suffering patients with normal hearing sensitivity, using transient evoked otoacoustic emission (TEOAEs) and threshold equalizing noise (TEN) test, if any. METHODS: Twenty patients suffering from unilateral tinnitus with normal hearing sensitivity participated in this study. Their other ear acted as control ears. They were subjected to full history taking, otoscopy, basic audiologic evaluation, TEOAEs and TEN test. RESULTS: TEOAEs were abnormal in 85% of the tinnitus ears compared to 20% in control ears; this difference was statistically significant. The abnormal TEOAEs frequency bands in the tinnitus ears were statistically significant above 2000 Hz when compared to the control ears and were more common for the 4000 and 5000 Hz. This suggests that OHCs dysfunction may be important in the generation of tinnitus. TEN test demonstrated dead regions in the cochlea in 15% of the tinnitus ears only. This might be attributed to increased resistance of IHCs to damage compared to OHCs vulnerability. The affected frequency location was at 500 Hz in 5%, 3000 and 4000 Hz in 10% of tinnitus ears. CONCLUSION: This work has shown a higher prevalence of OAE abnormalities in tinnitus patients with normal hearing in contrast to TEN test denoting the more vulnerability of OHCs to damage.

MeSH: Young Adult, Humans, Adult, Noise, Hair Cells, Auditory, Inner -- physiology, Middle Aged, Hair Cells, Auditory, Outer -- physiology, Adolescent, Female, Male, Audiometry, Pure-Tone (major), Auditory Threshold (major) -- physiology, Tinnitus (major) -- diagnosis, Tinnitus (major) -- physiopathology, Otoacoustic Emissions, Spontaneous (major) -- physiology, Perceptual Masking (major) -- physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Thabet, Elsaeid Mohamed

Publication title: Auris, nasus, larynx

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Document 35 of 100

Tinnitus in children without hearing impairment.

Author: Savastano, Marina¹; Marioni, Gino; de Filippis, Cosimo¹ Department of Medical-Surgical Specialities, University of Padua, Padua, Italy. marina.savastano@unipd.it

Publication info: International journal of pediatric otorhinolaryngology 73 1 (Dec 2009): S13-S15.

[ProQuest document link](#)

Abstract: OBJECTIVE: Tinnitus is not an uncommon symptom in the pediatric population and, despite its incidence, is still an unrecognized problem, particularly in normal hearing children. As tinnitus is frequently described by adults without evidence of ear disease, reports of tinnitus can be obtained also from a group of children without otological pathology. The present review has been performed in order to emphasize the great importance to try to identify children suffering from tinnitus and to recognize the difference between the tinnitus characteristics in children with ear pathology and those one without otological problems. METHODS: A review of the literature regarding the nature of pediatric tinnitus and the practical diagnostic approach to this symptom has been carried out. RESULTS: Children rarely complain spontaneously of tinnitus but are able to describe it when questioned. In our experience the total percentage of children with tinnitus rises from 6.5% (tinnitus reported spontaneously), to 34% when children are specifically questioned. Most children, more than 50%, have normal hearing; in those with hearing impairment, no particular type or severity of hearing loss has been found. An important point that must be considered much more seriously is tinnitus sequela following head injuries to which children are particularly exposed during their daily activities. Due to the serious consequences that may be caused by tinnitus, it is of great importance to identify and analyze it, so as to minimize its damage, utilizing a protocol of study of pediatric

tinnitus which allows to collect interesting informations about tinnitus characteristics. **CONCLUSIONS:** In considering that tinnitus in children exists and may provoke serious consequences, even in absence of ear pathology, it is necessary to investigate and understand more about this symptom in children. From this viewpoint, it is very important to recognize the value of a global evaluation of a child suffering from tinnitus. There is no reason why such an important symptom well reported in adults should not be investigated in the pediatric population in which it seems to be as frequent as in the adult one. It is reasonable to believe that also in children tinnitus may have significant implications for medical and rehabilitative management. Copyright 2009 Elsevier Ireland Ltd. All rights reserved.

MeSH: Severity of Illness Index, Humans, Incidence, Child, Tinnitus -- diagnosis, Tinnitus -- epidemiology, Tinnitus -- physiopathology, Child, Preschool, Hearing (major) -- physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Savastano, Marina

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Database: ComDisDome

Document 36 of 100

The auditory midbrain of people with tinnitus: abnormal sound-evoked activity revisited.

Author: Melcher, Jennifer R1; Levine, Robert A; Bergevin, Christopher; Norris, Barbara1 Eaton-Peabody Laboratory, Massachusetts Eye and Ear Infirmary, Boston, MA 02114, USA.

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Publication info: Hearing research 257.1-2 (Nov 2009): 63-74.

[ProQuest document link](#)

Abstract: Sound-evoked fMRI activation of the inferior colliculi (IC) was compared between tinnitus and

non-tinnitus subjects matched in threshold (normal), age, depression, and anxiety. Subjects were stimulated with broadband sound in an "on/off" fMRI paradigm with and without on-going sound from the scanner coolant pump. (1) With pump sounds off, the tinnitus group showed greater stimulus-evoked activation of the IC than the non-tinnitus group, suggesting abnormal gain within the auditory pathway of tinnitus subjects. (2) Having pump sounds on reduced activation in the tinnitus, but not the non-tinnitus group. This result suggests response saturation in tinnitus subjects, possibly occurring because abnormal gain increased response amplitude to an upper limit. (3) In contrast to Melcher et al. (2000), the ratio of activation between right and left IC did not differ significantly between tinnitus and non-tinnitus subjects or in a manner dependent on tinnitus laterality. However, new data from subjects imaged previously by Melcher et al. suggest a possible tinnitus subgroup with abnormally asymmetric function of the IC. The present and previous data together suggest elevated responses to sound in the IC are common among those with tinnitus and normal thresholds, while abnormally asymmetric activation is not, even among those with lateralized tinnitus.

MeSH: Magnetic Resonance Imaging, Young Adult, Inferior Colliculi -- pathology, Inferior Colliculi -- physiopathology, Audiometry, Pure-Tone, Auditory Pathways -- pathology, Auditory Pathways -- physiopathology, Auditory Threshold, Humans, Sound Spectrography, Tinnitus -- pathology, Tinnitus -- physiopathology, Brain Mapping -- methods, Adult, Noise -- adverse effects, Case-Control Studies, Middle Aged, Acoustic Stimulation, Perceptual Masking, Male, Female, Functional Laterality, Evoked Potentials, Auditory (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Melcher, Jennifer R

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Document 37 of 100

Intratympanic methylprednisolone injections for subjective tinnitus.

Author: Topak, M1; Sahin-Yilmaz, A; Ozdoganoglu, T; Yilmaz, H B; Ozbay, M; Kulekci, M1
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Publication info: The Journal of laryngology and otology 123.11 (Nov 2009): 1221-1225.

[ProQuest document link](#)

Abstract: **OBJECTIVES:** This study aimed to determine whether intratympanically injected methylprednisolone is effective in treating subjective tinnitus refractory to medical treatment. **STUDY DESIGN:** Prospective, randomised, placebo-controlled, single-blinded study. **METHODS:** Seventy adult patients with subjective tinnitus of cochlear origin were randomly assigned to receive intratympanic injection of either methylprednisolone or saline solution. The treatment protocol comprised three intratympanic injections, one per week for three weeks. Improvement in tinnitus severity was measured by a self-rated tinnitus loudness scale and by the tinnitus severity index, at baseline and two weeks after the last injection. **RESULTS:** Data for 59 patients were available for analysis. There was no significant difference between the two treatment groups regarding age, sex, pure tone average, pretreatment tinnitus intensity, tinnitus laterality or tinnitus duration. There was a significant post-treatment improvement in self-rated tinnitus loudness scale results in both groups. No significant post-treatment changes in the tinnitus severity index individual and total scores were observed in either group. The most frequently encountered side effects were pain during injection, vertigo, a burning sensation around the ear and in the throat, and a bitter taste. A burning sensation and bitter taste were observed more often in the methylprednisolone group compared with the placebo group. **CONCLUSION:** The results of this study indicate that intratympanic methylprednisolone has no benefit, compared with placebo, for the treatment of subjective tinnitus of cochlear origin refractory to medical treatment.

Subject: Audiometry, Pure-Tone; Drug Administration Schedule; Female; *Glucocorticoids: administration & dosage; Humans; Injections: methods; Male; *Methylprednisolone: administration & dosage; Methylprednisolone: adverse effects; Middle Aged; Prospective Studies; Single-Blind Method; *Tinnitus: drug therapy; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Topak, M

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Document type: Randomized Controlled Trial, Journal Article

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Last updated: 2012-04-12

Database: ComDisDome

Document 38 of 100

Association between tinnitus retraining therapy and a tinnitus control instrument.

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Publication info: Auris, nasus, larynx 36.5 (Oct 2009): 536-540.

[ProQuest document link](#)

Abstract: OBJECTIVE: Tinnitus retraining therapy (TRT), which is an adaptation therapy for tinnitus based on the neurophysiological model proposed by Jastreboff in 1990, consists of directive counseling and acoustic therapy with a tinnitus control instrument (TCI) or other devices. For the past 5 years, our hospital has administered TRT characterized by the use of a TCI. METHOD: In this study, we reviewed the clinical course of patients with tinnitus who presented to our outpatient clinic for tinnitus and hearing loss during the 3-year period from April 2004 to March 2007 and underwent TRT with a TCI. Among 188 patients with tinnitus (105 males and 83 females), 88 patients (51 males and 37 females, excluding dropouts) who purchased a TCI and continued therapy were included in the study. RESULTS: Significant improvement in Tinnitus Handicap Inventory (THI) and Visual Analogue Scale (VAS) scores was found as early as 1 month of treatment and later compared with those on initial examination, suggesting that TRT with a TCI may be an effective treatment for tinnitus. Among the noises generated by the TCI, the sound pressure output from the TCI was set at just below tinnitus loudness level both of the first adjustment and the second adjustment. Speech noise and white noise were frequently selected, whereas high-frequency noise and pink noise were infrequently selected. Speech noise was most frequently selected at the first adjustment, and the number of patients selecting white noise increased at the second adjustment. The results that we compared the two also revealed that the mean hearing level and tinnitus loudness levels were higher in the white noise group than in the speech noise group, which suggested that the inner ear disorder was more harder in the white noise group. Both the THI score and VAS grade improved after 1 month of treatment in the speech noise group, whereas improvement in these parameters was observed in the white noise group after 6 months of treatment. These results suggest that it took much longer the patients in the white noise group to improve. CONCLUSION: : Significant improvement in THI and VAS scores was found as early as 1 month of treatment and later compared with those on initial examination, suggesting that TRT with a TCI may be an effective treatment for tinnitus. It resulted that many patients chose the speech noise or the white noise. And also it was indicated that noise generators set at just below mixing point with tinnitus are more effective. In this study, however, speech noise was often selected probably because of the reduced output at high frequencies and the level of comfort. As white noise produces greater sound volume, patients tended to switch from other therapeutic sound to white noise at the second adjustment. These findings may help administer acoustic therapy in the future.

MeSH: Audiometry, Pure-Tone, Humans, Pain Measurement, Tinnitus -- complications, Tinnitus -- diagnosis, Tinnitus -- physiopathology, Tinnitus -- rehabilitation, Treatment Outcome, Noise, Disabled Persons, Hearing Loss -- complications, Hearing Loss -- rehabilitation, Speech, Female, Male, Counseling (major), Adaptation, Psychological (major), Acoustic Stimulation (major) -- instrumentation, Acoustic Stimulation (major) -- methods

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ito, Mari

Publication title: Auris, nasus, larynx

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Document 39 of 100

Treatment of dural arteriovenous fistulas presenting as pulsatile tinnitus.

Author: Delgado, Fernando¹; Muñoz, Francisco; Bravo-Rodríguez, Francisco; Jurado-Ramos, Alfredo; Oteros, Rafael¹ Department of Neuroradiology, Reina Sofía University Hospital, Department of Medicine (Dermatology, Medicine, and Otolaryngology), School of Medicine, University of Cordova, Cordova, Spain. fernando.delgado.sspa@juntadeandalucia.es

Publication info: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 30.7 (Oct 2009): 897-902.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** To describe the clinical picture and treatment of dural arteriovenous fistulas (DAVFs) presenting as pulsatile subjective tinnitus. **STUDY DESIGN:** Review of prospectively collected data. **SETTING:** Academic referral center. **PATIENTS:** Fourteen patients with clinically and radiographically diagnosed DAVFs. **INTERVENTIONS:** Treated by endovascular route. **MAIN OUTCOME MEASURES:** Treatments, clinical course, complications, and evolution were evaluated. **RESULTS:** All patients presented with sleep-disruptive pulsatile tinnitus. Other symptoms included severe headaches, papilledema, proptosis, blepharoptosis, visual disturbances, and hemiparesis. Cortical venous drainage was present in 4 cases. Endovascular treatment was performed at least once by the arterial route in 14 patients and the venous route in 4 patients. The origin of tinnitus was always a vessel in or above the petrous bone. When these arteries or veins could not be visualized in the final control, the tinnitus disappeared. In the patients whose tinnitus returned, a vessel in the petrous bone could always be seen. There was no mortality. **CONCLUSION:** Endovascular treatment is an effective and safe treatment of DAVFs presenting as tinnitus.

MeSH: Papilledema -- etiology, Papilledema -- physiopathology, Paresis -- etiology, Paresis -- physiopathology, Embolization, Therapeutic, Humans, Sleep Disorders -- etiology, Sleep Disorders --

physiopathology, Aged, Exophthalmos -- etiology, Exophthalmos -- physiopathology, Prospective Studies, Aged, 80 and over, Petrous Bone -- blood supply, Adult, Headache -- etiology, Headache -- physiopathology, Treatment Outcome, Middle Aged, Female, Male, Blepharoptosis -- etiology, Blepharoptosis -- physiopathology, Central Nervous System Vascular Malformations (major) -- complications, Central Nervous System Vascular Malformations (major) -- physiopathology, Central Nervous System Vascular Malformations (major) -- therapy, Tinnitus (major) -- etiology, Tinnitus (major) -- physiopathology, Tinnitus (major) -- therapy

Record owner: National Library of Medicine

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Correspondence author: Delgado, Fernando

Publication title: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology

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Last updated: 2010-09-25

Database: ComDisDome

Document 40 of 100

Neural activity underlying tinnitus generation: results from PET and fMRI.

Author: Lanting, C P1; de Kleine, E; van Dijk, P1 Department of Otorhinolaryngology/Head and Neck Surgery, University Medical Center Groningen, The Netherlands. c.p.lanting@med.umcg.nl

Publication info: Hearing research 255.1-2 (Sep 2009): 1-13.

[ProQuest document link](#)

Abstract: Tinnitus is the percept of sound that is not related to an acoustic source outside the body. For many forms of tinnitus, mechanisms in the central nervous system are believed to play an important role in the pathology. Specifically, three mechanisms have been proposed to underlie tinnitus: (1) changes in the

level of spontaneous neural activity in the central auditory system, (2) changes in the temporal pattern of neural activity, and (3) reorganization of tonotopic maps. The neuroimaging methods fMRI and PET measure signals that presumably reflect the firing rates of multiple neurons and are assumed to be sensitive to changes in the level of neural activity. There are two basic paradigms that have been applied in functional neuroimaging of tinnitus. Firstly, sound-evoked responses as well as steady state neural activity have been measured to compare tinnitus patients to healthy controls. Secondly, paradigms that involve modulation of tinnitus by a controlled stimulus allow for a within-subject comparison that identifies neural activity that may be correlated to the tinnitus percept. Even though there are many differences across studies, the general trend emerging from the neuroimaging studies, is that tinnitus in humans may correspond to enhanced neural activity across several centers of the central auditory system. Also, neural activity in non-auditory areas including the frontal areas, the limbic system and the cerebellum seems associated with the perception of tinnitus. These results indicate that in addition to the auditory system, non-auditory systems may represent a neural correlate of tinnitus. Although the currently published neuroimaging studies typically show a correspondence between tinnitus and enhanced neural activity, it will be important to perform future studies on subject groups that are closely matched for characteristics such as age, gender and hearing loss in order to rule out the contribution of these factors to the abnormalities specifically ascribed to tinnitus.

MeSH: Somatosensory Cortex -- physiopathology, Auditory Cortex -- blood supply, Auditory Cortex -- physiopathology, Magnetic Resonance Imaging, Eye Movements, Positron-Emission Tomography, Auditory Pathways -- physiopathology, Humans, Lidocaine -- therapeutic use, Movement, Regional Blood Flow, Vestibulocochlear Nerve -- physiopathology, Noise, Acoustic Stimulation, Female, Male, Tinnitus (major) -- etiology, Tinnitus (major) -- physiopathology, Tinnitus (major) -- radionuclide imaging, Tinnitus (major) -- therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Lanting, C P

Publication title: Hearing research

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Database: ComDisDome

Document 41 of 100

Influence of tonic and burst transcranial magnetic stimulation characteristics on acute inhibition of subjective tinnitus.

Author: Meeus, Olivier¹; Blaivie, Catherine; Ost, Jan; De Ridder, Dirk; Van de Heyning, Paul¹ University Department of Otorhinolaryngology and Head and Neck Surgery, Antwerp University Hospital, University of Antwerp, Antwerp, Belgium. olivier.meeus@uza.be

Publication info: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 30.6 (Sep 2009): 697-703.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** Transcranial magnetic stimulation (TMS) is already broadly used in different areas of neuroscience research. In the last years, special attention was drawn to TMS in tinnitus. The aim of our study is to investigate the stimulation characteristics of TMS in tinnitus patients, in particular the effect of tonic and burst stimulation of the superior temporal lobe. **STUDY DESIGN:** Prospective sham-controlled study. **SETTING:** Tertiary referral center. **PATIENTS:** Fifty tinnitus patients were included in the study. Thirty-one patients had pure-tone tinnitus, and 19 patients had noise-like tinnitus. **STUDY DESIGN:** Transcranial magnetic stimulation was performed in 1 session of 200 pulses at different frequencies. Stimuli were delivered to the auditory cortex region contralateral to the tinnitus side. Tonic and burst stimulations were delivered at different frequencies. Patients were asked to rate the acute tinnitus reduction after TMS on a visual analog scale. **MAIN OUTCOME MEASURE:** Acutely perceived tinnitus reduction immediately after TMS, scored by the patient on a visual analogue scale ranging from 0 to 100%. **RESULTS:** Tinnitus reduction increased when stimulation intensity was higher relative to the patient's motor threshold. Nevertheless, this stimulation intensity was shown only to account for 10% of this increased tinnitus reduction, meaning that up to 90% of this effect should be ascribed to other factors than stimulation intensity alone. Different reactions on TMS were found in bilateral tinnitus patients compared with unilateral tinnitus patients. **CONCLUSION:** Several parameters determine the amount of tinnitus reduction after TMS. An increased stimulation intensity relative to the patient's motor threshold only accounts for 10% of this effect. Our data also suggest different pathophysiologic mechanisms for unilateral and bilateral tinnitus.

MeSH: Young Adult, Humans, Linear Models, Aged, Motor Cortex -- physiology, Prospective Studies, Adult, Acoustic Stimulation, Middle Aged, Female, Functional Laterality -- physiology, Male, Tinnitus (major) -- physiopathology, Tinnitus (major) -- therapy, Transcranial Magnetic Stimulation (major) -- methods

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Meeus, Olivier

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

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Database: ComDisDome

Document 42 of 100

Effects of hearing aid fitting on the perceptual characteristics of tinnitus.

Author: Moffat, G1; Adjout, K; Gallego, S; Thai-Van, H; Collet, L; Noreña, A J1 Laboratoire de neurobiologie intégrative et adaptative, UMR CNRS 6149, 3 Place Victor Hugo, Marseille, F-13331 Cedex 03, France.

Publication info: Hearing research 254.1-2 (Aug 2009): 82-91.

[ProQuest document link](#)

Abstract: Restoration of auditory input through the use of hearing aids has been proposed as a potentially important means of altering tinnitus among those tinnitus sufferers who experience significant sensorineural hearing loss. In animal models of neural plasticity induced by noise trauma, high-frequency stimulation in deafferented regions of the auditory spectrum has been shown to modulate cortical reorganization after hearing loss, a result which suggests that the neural basis of tinnitus is subject to interference by acoustic stimulation. This study drew on deafferentation models to investigate the effect of hearing aids on the psychoacoustic properties of the tinnitus sensation, using both conventional amplification and high-bandwidth amplification regimes. The tinnitus percept was affected only weakly in the conventional amplification group, and was not at all affected in the high-bandwidth group. The changes observed under conventional, low-to-medium frequency amplification may indicate that the perceptual characteristics of tinnitus depend on the pattern of sensory inputs - notably a contrast in activity between adjacent central auditory regions of more and less afferent activity - while the absence of modifications in the high-bandwidth amplification group suggests limit on the tractability of the tinnitus percept. This limit to the malleability of the tinnitus percept may arise from either the extent of hearing deficits or the duration and robustness of the neuroplastic changes that originally give rise to tinnitus.

MeSH: Auditory Threshold -- physiology, Humans, Aged, Perception, Aged, 80 and over, Adult, Case-Control Studies, Hearing Tests, Psychoacoustics, Acoustic Stimulation, Middle Aged, Hearing, Female, Male, Hearing Aids (major), Tinnitus (major) -- rehabilitation

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Moffat, G

Publication title: Hearing research

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Document 43 of 100

Subjective tinnitus and hearing problems in adolescents.

Author: Bulbul, Selda Fatma1; Muluk, Nuray Bayar; Cakir, Elif Pinar; Tufan, Erennur1 Kirikkale University, Faculty of Medicine, Pediatrics Department, Turkey.

Publication info: International journal of pediatric otorhinolaryngology 73.8 (Aug 2009): 1124-1131.

[ProQuest document link](#)

Abstract: OBJECTIVES: We investigated the hearing problems and tinnitus frequencies in adolescents at three public primary and two high schools. METHODS: This study was carried out at three public primary and two high schools. 428 Turkish school children (244 girls, 184 boys) were asked to voluntarily answer a set of questionnaires in their classrooms at the beginning of the training program. There were 250 students (105 male, 145 female) in Primary School and 178 (79 male, 99 female) students in High School. We used questionnaire to evaluate subjective tinnitus and hearing problems. Walkman usage, listening loud and noisy music, intra-familial physical trauma, concentration difficulty in class and school success were also evaluated. RESULTS: In age-related groups (Group 1=11-13 years; Group 2=13-15 years; Group 3=16-18 years), hearing loss was present in 32.1% of Group 1, 19% of Group 2 and 28.3% of Group 3. Listening loud and noisy music was reported in 81.8% of Group 1, 95.4% of Group 2 and 87% of Group 3. Tinnitus was present 36.8% in Group 2, 33.5% in Group 1 and 31.5% in Group 3. Tinnitus after listening loud music was present in 42.7% of Group 2, 36.1% of Group 3 and 25.6% of Group 1. Among all students with tinnitus, 19.5% considered their school success as very good, 41.1% as good and 39.4% as bad. In students, using Walkman, tinnitus was seen both in the right and left ears. CONCLUSION: Tinnitus may be seen in adolescents at primary and high schools. Listening loud and noisy music and Walkman usage may cause an increase in the frequency of tinnitus manifestation. Adolescents should be educated about the hazardous effects of loud music. Education should include families, teachers, students, and whole community. These issues should be taken into public health policy of the countries.

MeSH: Life Style, Questionnaires, Humans, Music, Child, Health Education, Adolescent, Male, Female, Hearing Disorders (major) -- physiopathology, Tinnitus (major) -- physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Bulbul, Selda Fatma

Publication title: International journal of pediatric otorhinolaryngology

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Document 44 of 100

Deep brain stimulation effects in patients with tinnitus.

Author: Shi, Yongbing¹; Burchiel, Kim J; Anderson, Valerie C; Martin, William Hal¹ Department of Otolaryngology-Head and Neck Surgery, Oregon Hearing Research Center, Portland, OR 97201, USA.

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 141.2 (Aug 2009): 285-287.

[ProQuest document link](#)

Abstract: To report deep brain stimulation (DBS) effects in patients with tinnitus. Case series with chart review. Tertiary medical center. Seven patients implanted with DBS systems for movement disorders who also reported having tinnitus were interviewed about their tinnitus conditions. Four were available for testing in a specialized tinnitus clinic with their DBS systems turned off or on. Testing included matching of self-rated and psychoacoustically measured tinnitus loudness to measure the impact of DBS on tinnitus. Three of the seven patients reported reduced tinnitus loudness when DBS was turned on. Of the four patients tested in the clinic, results indicated that DBS of the ventralis intermedius nucleus of the thalamus caused decreases in tinnitus loudness in two patients with relatively prolonged residual inhibition. These results suggest that DBS of nonauditory thalamus structures may provide tinnitus relief for some patients.

Subject: Aged; Aged, 80 and over; Audiometry: methods; *Deep Brain Stimulation: methods; Electrodes, Implanted; Female; Hospitals, University; Humans; Male; Medical Records; Middle Aged; Movement Disorders: etiology; *Movement Disorders: therapy; Parkinson Disease: therapy; Quality of Life; Questionnaires; Tinnitus: etiology; *Tinnitus: therapy; Treatment Outcome; Ventral Thalamic Nuclei: surgery

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Shi, Yongbing

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

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Number of pages: 3

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ISSN: 0194-5998

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Document 45 of 100

Tinnitus treatment with piribedil guided by electrocochleography and acoustic otoemissions.

Author: de Azevedo, Andréia Aparecida¹; Langguth, Berthold; de Oliveira, Patricia Mello; Rodrigues Figueiredo, Ricardo¹ OTOSUL, Otorrinolaringologia Sul-Fluminense, Volta Redonda, Rio de Janeiro, Brazil. aaazevedo@otosul.com.br

Publication info: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology 30.5 (Aug 2009): 676-680.

[ProQuest document link](#)

Abstract: INTRODUCTION: Tinnitus is a frequent disorder and very difficult to treat. Both animal studies and clinical observations suggest that dopaminergic substances might have potential for the treatment of

tinnitus. Here, we investigated the dopamine agonist piribedil for the treatment of chronic tinnitus. In all participants, we performed audiometry, electrocochleography (ECoG), and otoacoustic emissions before treatment began. **OBJECTIVE:** To assess the efficacy and safety of the dopaminergic drug piribedil for the treatment of tinnitus and to evaluate whether ECoG and acoustic otoemissions might be useful for predicting treatment response. **STUDY DESIGN:** Prospective randomized double-blind crossover study. **SUBJECTS AND METHOD:** One hundred patients with tinnitus were randomized into a double-blind, placebo-controlled, prospective crossover study. All patients underwent distortion product acoustic otoemissions with and without contralateral suppression and ECoG. Patients received 50 mg piribedil and placebo for 90 days each, separated by a 30-day washout period. Treatment effects were assessed by using the Tinnitus Handicap Inventory and a visual analog scale. Fifty-six patients completed the trial. **RESULTS:** There was no significant improvement of Tinnitus Handicap Inventory and visual analog scale score after piribedil treatment as compared with placebo. However, results were characterized by high interindividual variability. Post hoc analysis of piribedil effects revealed that piribedil treatment responders differed from nonresponders by the occurrence of a double peak in the ECoG. In addition, normal distortion product acoustic otoemission suppression patterns indicated better treatment response with piribedil. The incidence of side effects during piribedil treatment was 23.3%, leading to interruption of treatment in all cases. **CONCLUSION:** Piribedil is not superior to placebo in the treatment of tinnitus. Piribedil treatment responders differed from nonresponders by specific findings in the ECoG and in the distortion product acoustic otoacoustic emissions, suggesting a beneficial effect of piribedil in an electrophysiologically characterized tinnitus subgroup.

MeSH: Double-Blind Method, Humans, Cross-Over Studies, Aged, Middle Aged, Tinnitus -- diagnosis, Tinnitus -- drug therapy, Male, Female, Otoacoustic Emissions, Spontaneous (major) -- physiology, Piribedil (major) -- administration & dosage, Piribedil (major) -- therapeutic use, Dopamine Agents (major) -- administration & dosage, Dopamine Agents (major) -- therapeutic use, Audiometry, Evoked Response (major)

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Correspondence author: de Azevedo, Andréia Aparecida

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Subfile: Index Medicus

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Database: ComDisDome

Document 46 of 100

The mechanisms of tinnitus: perspectives from human functional neuroimaging.

Author: Adjamian, Peyman1; Sereda, Magdalena; Hall, Deborah A1 MRC Institute of Hearing Research, University Park, Nottingham NG7 2RD, United Kingdom. peyman@ihr.mrc.ac.uk

Publication info: Hearing research 253.1-2 (Jul 2009): 15-31.

[ProQuest document link](#)

Abstract: In this review, we highlight the contribution of advances in human neuroimaging to the current understanding of central mechanisms underpinning tinnitus and explain how interpretations of neuroimaging data have been guided by animal models. The primary motivation for studying the neural substrates of tinnitus in humans has been to demonstrate objectively its representation in the central auditory system and to develop a better understanding of its diverse pathophysiology and of the functional interplay between sensory, cognitive and affective systems. The ultimate goal of neuroimaging is to identify subtypes of tinnitus in order to better inform treatment strategies. The three neural mechanisms considered in this review may provide a basis for TI classification. While human neuroimaging evidence strongly implicates the central auditory system and emotional centres in TI, evidence for the precise contribution from the three mechanisms is unclear because the data are somewhat inconsistent. We consider a number of methodological issues limiting the field of human neuroimaging and recommend approaches to overcome potential inconsistency in results arising from poorly matched participants, lack of appropriate controls and low statistical power.

MeSH: Auditory Cortex -- physiopathology, Magnetoencephalography, Animals, Humans, Electroencephalography, Lidocaine -- therapeutic use, Disease Models, Animal, Action Potentials, Models, Neurological, Perceptual Masking, Electrophysiological Phenomena, Tinnitus (major) -- etiology, Tinnitus (major) -- physiopathology, Tinnitus (major) -- psychology, Tinnitus (major) -- therapy

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Correspondence author: Adjamian, Peyman

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Document 47 of 100

Could an underlying hearing loss be a significant factor in the handicap caused by tinnitus?

Author: Ratnayake, S A B1; Jayarajan, V; Bartlett, J1 Department of Audiological Medicine, Royal Surrey County Hospital, Guildford, United Kingdom.

Publication info: Noise & health 11.44 (Jul 2009): 156-160.

[ProQuest document link](#)

Abstract: There have been several studies that have demonstrated a link between the hearing loss of subjects and tinnitus. However, there has been no systematic evaluation of the link between perceived tinnitus distress and an underlying hearing loss. The purpose of the current study is to explore this association, and ascertain whether a subject's hearing loss contributes to the handicap caused by tinnitus. A group of 96 adults were evaluated with Pure Tone Audiometry and a questionnaire that included the Tinnitus Handicap Inventory (THI). In 58% of the subjects, the side of the unilateral or worse tinnitus corresponded with the ear with poorer hearing thresholds. A subset of the THI, the Two Question Mean (TQM) that was related to questions with regard to communication, correlated significantly with the hearing thresholds in the better hearing ear ($P < 0.01$). There was also a significant correlation between the THI and TQM scores ($P < 0.01$). These results suggested that in tinnitus subjects with impaired hearing, the underlying hearing loss may be a significant factor in the perceived distress.

Subject: Audiometry, Pure-Tone; Cohort Studies; Disability Evaluation; Female; Health Status Indicators; *Hearing Loss: complications; Hearing Loss: psychology; Humans; Male; Middle Aged; Prospective Studies; Questionnaires; Risk Factors; Statistics as Topic; Tinnitus: psychology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ratnayake, S A B

Publication title: Noise & health

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Issue: 44

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Database: ComDisDome

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Estimation of factors influencing the results of tinnitus retraining therapy.

Author: Koizumi, Toshizo¹; Nishimura, Tadashi; Sakaguchi, Takefumi; Okamoto, Masanori; Hosoi, Hiroshi¹
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Publication info: Acta oto-laryngologica. Supplementum 562 (Jun 2009): 40-45.

[ProQuest document link](#)

Abstract: The factors of tinnitus loudness and Tinnitus Handicap Inventory (THI) score in tinnitus patients have the potential to relate to therapeutic results of tinnitus retraining therapy (TRT). To confirm what factors in tinnitus influence the results of TRT, twelve factors were investigated in 53 patients with tinnitus, examining the relationship between these factors and the results of TRT. A THI score was determined before and 6 months after TRT introduction (pre- and post-TRT). Moreover, the change of THI score from pre- to post-TRT (delta THI) was referred to as the therapeutic effect of TRT. Based on the 12 factors, subjects were respectively divided into two groups, comparing delta THI between groups. Two groups of greater tinnitus loudness and higher THI score showed significant increases in delta THI, indicating that two factors of tinnitus loudness and THI score were related to the therapeutic effect of TRT.

Subject: Counseling: methods; Female; Humans; Hyperacusis: physiopathology; Male; Middle Aged; Severity of Illness Index; Tinnitus: physiopathology; *Tinnitus: rehabilitation; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Koizumi, Toshizo

Publication title: Acta oto-laryngologica. Supplementum

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Number of pages: 6

Publication year: 2009

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Format availability: Print

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Document type: Journal Article

Subfile: Index Medicus

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Accession number: pmid-19848238

ProQuest document ID: 85415152

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Last updated: 2012-07-13

Database: ComDisDome

Document 49 of 100

Patient-centered tinnitus management tool: a clinical audit.

Author: Aazh, Hashir1; Moore, Brian C J; Roberts, Pete1 Audiology Department, Ealing Hospital, Uxbridge Road, Southall, London UB1 3HW, United Kingdom. hashir.aazh@nhs.net

Publication info: American journal of audiology 18.1 (Jun 2009): 7-13.

[ProQuest document link](#)

Abstract: To evaluate the impact of an educational poster describing treatment options available to patients experiencing tinnitus. A patient-centered tinnitus management tool (PCTMT) was developed in the form of an educational poster that encouraged patients to decide how they wanted to deal with their tinnitus from the following options: (a) ignore the tinnitus and forget about it, (b) use a sound generator, (c) undertake tinnitus counseling with an expert, or (d) deal with the tinnitus using hearing aids (in the case of tinnitus and hearing loss). Fifty-five patients who were referred to the audiology department of a London hospital from the ENT department for tinnitus counseling were asked to read the PCTMT and to choose the option(s) that suited them the best. Forty-two percent of the patients wished to undertake counseling, 9% decided to try to ignore their tinnitus without help, 26% wanted to deal with their tinnitus with the help of a sound generator, and 24% decided to use hearing aids. The PCTMT reduced the number of patients who would otherwise have been referred for tinnitus counseling by 58%. This reduced the length of the waiting list and increased the time available for counseling of those patients who wanted it.

Subject: Acoustic Stimulation; Adaptation, Psychological; Attention; Choice Behavior; *Clinical Audit; Counseling; Hearing Aids; Humans; Pamphlets; *Patient Education as Topic: methods; *Patient Participation; *Patient-Centered Care: methods; Tinnitus: psychology; *Tinnitus: rehabilitation

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Aazh, Hashir

Publication title: American journal of audiology

Volume: 18

Issue: 1

Pages: 7-13

Number of pages: 7

Publication year: 2009

Year: 2009

Location: United States

ISSN: 1059-0889

Source type: Scholarly Journals

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-19380508

ProQuest document ID: 85387194

Document URL: <http://search.proquest.com/docview/85387194?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 50 of 100

Tinnitus is prevalent in children with cochlear implants.

Author: Chadha, Neil K1; Gordon, Karen A; James, Adrian L; Papsin, Blake C1 Department of Otolaryngology, The Hospital for Sick Children, Toronto, Ontario, Canada. neil.chadha@utoronto.ca

Publication info: International journal of pediatric otorhinolaryngology 73.5 (May 2009): 671-675.

[ProQuest document link](#)

Abstract: **OBJECTIVES:** To explore the prevalence and the perceived impact of tinnitus in children using cochlear implants. **METHOD:** Cross-sectional study of implanted children attending a cochlear implant family event organized annually by our academic tertiary pediatric care center. Children were interviewed together with their parents, using open-questioning and structured interview qualitative methodologies. The main outcome measures were the prevalence of tinnitus and any impact of these symptoms. **RESULTS:** 40 children (age range: 3-15, mean: 7 years) and their families were interviewed. These included unilateral implantees (n=21), and bilateral implantees (n=19) whose two procedures were simultaneous (n=6), within 6-12 months (n=3), or >2 years apart (n=10). Tinnitus was reported by 38% (n=15). Tinnitus occurred most commonly in the implanted ear, when the implants were not in use (e.g. in bed at night). The children were generally untroubled by the tinnitus, although two reported difficulty sleeping. Tinnitus was most frequent in children aged 6-8 years (8/17, 47%), and in bilateral implantees with an inter-procedure delay of at least 2 years (6/10, 60%). Tinnitus was least reported in those implanted bilaterally simultaneously (1/6, 17%), and in those 5 years old or younger (3/11, 27%). No obvious relationship was identified between the prevalence of tinnitus and the etiology of deafness, age of implantation, or time elapsed since implantation. **CONCLUSIONS:** To our knowledge this is the first study to report the widespread prevalence of tinnitus in implanted children. Further work, particularly examining the effect of inter-implant delay on tinnitus in bilateral implantees, may contribute to our understanding of the neuronal plasticity after implantation.

MeSH: Severity of Illness Index, Questionnaires, Humans, Child, Parent-Child Relations, Tinnitus -- diagnosis, Tinnitus -- epidemiology, Child, Preschool, Cross-Sectional Studies, Deafness -- epidemiology, Deafness -- surgery, Observer Variation, Adolescent, Female, Male, Prevalence, Cochlear Implants (major) -- statistics & numerical data

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Chadha, Neil K

Publication title: International journal of pediatric otorhinolaryngology

Volume: 73

Issue: 5

Pages: 671-675

Number of pages: 5

Publication year: 2009

Year: 2009

ISSN: 0165-5876

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Peer reviewed: Yes

Format availability: Internet

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Document type: Journal Article

Subfile: Index Medicus

Update: 2010-04-13

Accession number: pmid-19185357

ProQuest document ID: 742773426

Document URL: <http://search.proquest.com/docview/742773426?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

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Tinnitus distress, anxiety, depression, and hearing problems among cochlear implant patients with tinnitus.

Author: Andersson, Gerhard¹; Freijd, Anders; Baguley, David M; Idrizbegovic, Esma¹ Swedish Institute for Disability Research, Department of Behavioural Sciences and Learning, Linköping University, Linköping, Sweden. Gerhard.Andersson@liu.se

Publication info: Journal of the American Academy of Audiology 20.5 (May 2009): 315-319.

[ProQuest document link](#)

Abstract: While several studies have investigated the presence and annoyance of tinnitus in cochlear implant (CI) recipients, few studies have probed the handicap experienced in association with tinnitus in this population. The aim of this study was to use validated self-report measures in a consecutive sample of CI patients who reported tinnitus in order to determine the extent of tinnitus handicap. In a retrospective design, a total of 151 patients (80% response rate) responded to a postal questionnaire, and of these, 111 (74%) reported that they currently experienced tinnitus and were asked to complete the full questionnaire. Sampling was performed at a point of a mean 2.9 years postsurgery (SD = 1.8 years). Three established self-report questionnaires were included measuring tinnitus handicap (Tinnitus Handicap Inventory [THI]), hearing problems (Gothenburg Profile), and finally, a measure of anxiety and depression (Hospital Anxiety and Depression Scale). We analyzed the data by means of Pearson product moment correlations, t-tests, ANOVAs, and chi-square. Data from the validated questionnaires showed relatively low levels of tinnitus distress, moderate levels of hearing problems, and low scores on the anxiety and depression scales. Using the criteria proposed for the THI (which was completed by 107 patients), 35% (N = 38) had a score indicating "no handicap," 30% (N = 32) "mild handicap" 18% (N = 19) "moderate handicap", and 17% (N = 18) "severe handicap." Thus 37 individuals from the total series of 151 reported moderate to severe tinnitus handicap (24.5%). Tinnitus distress was associated with increased hearing problems, anxiety, and depression. Tinnitus can be a significant problem following CI, but that the experienced distress is often moderate. However, a quarter of CI recipients do demonstrate

moderate/severe tinnitus handicap, and thus are candidates for tinnitus specific therapy. The level of tinnitus handicap is associated with hearing problems and psychological distress.

Subject: Adult; Aged; Aged, 80 and over; *Anxiety: etiology; Anxiety: pathophysiology; *Cochlear Implants; *Depression: etiology; Depression: pathophysiology; Disability Evaluation; Female; Follow-Up Studies; Hearing Loss, Sensorineural: complications; Hearing Loss, Sensorineural: pathophysiology; *Hearing Loss, Sensorineural: surgery; Humans; Male; Middle Aged; Questionnaires; Retrospective Studies; *Tinnitus: complications; Tinnitus: pathophysiology; Tinnitus: rehabilitation; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Andersson, Gerhard

Publication title: Journal of the American Academy of Audiology

Volume: 20

Issue: 5

Pages: 315-319

Number of pages: 5

Publication year: 2009

Year: 2009

Location: Canada

ISSN: 1050-0545

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, Non-u.s. Gov't, Journal Article, Research Support

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-19585962

ProQuest document ID: 85383653

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Last updated: 2012-07-13

Database: ComDisDome

Document 52 of 100

Tinnitus after cochlear implantation.

Author: Akdogan, Ozgur1; Ozcan, Ibrahim; Ozbek, Cem; Dere, Huseyin1 Ankara Numune Education and Research Hospital, Turkey. drozgurakdogan@gmail.com

Publication info: Auris, nasus, larynx 36.2 (Apr 2009): 210-212.

[ProQuest document link](#)

Abstract: OBJECTIVE: The purpose of this study was to investigate properties of tinnitus which starts after cochlear implantation. Of the 17 adult patients in our cochlear implant group, four (23.5%) who had no pre-implantation tinnitus were eligible for the study. METHODS: Each patient was requested to complete a short questionnaire regarding his or her experience with tinnitus. Tinnitus match test was

performed for each patient by using an Interacoustic Clinical Audiometer (model AC40; Assens, Denmark). RESULTS: Tinnitus match test revealed a tinnitus frequency of a 4KHz for three and of a 6KHz for one patient. Mean value of the loudness score was calculated as 17.5dB SL. CONCLUSIONS: The results of this study emphasize the importance of counseling patients regarding risks of tinnitus after cochlear implantation.

MeSH: Young Adult, Humans, Retrospective Studies, Sound Spectrography, Patient Education as Topic, Risk Factors, Adult, Middle Aged, Female, Male, Cochlear Implantation (major) -- adverse effects, Tinnitus (major) -- etiology, Deafness (major) -- rehabilitation, Postoperative Complications (major) -- etiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Akdogan, Ozgur

Publication title: Auris, nasus, larynx

Volume: 36

Issue: 2

Pages: 210-212

Number of pages: 3

Publication year: 2009

Year: 2009

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Document type: Journal Article

Subfile: Index Medicus

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Accession number: pmid-18614307

ProQuest document ID: 742773047

Document URL: <http://search.proquest.com/docview/742773047?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 53 of 100

Questionnaires to evaluate anxiety and depressive levels in tinnitus patients.

Author: Crocetti, Andrea¹; Forti, Stella; Ambrosetti, Umberto; Bo, Luca Del¹ Fondazione Ascolta e Vivi, Milan, Italy.

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 140.3 (Mar 2009): 403-405.

[ProQuest document link](#)

Abstract: The aim of this study was to evaluate the correlation between the most common instruments used to quantify tinnitus and the level of anxiety and depression experienced by patients in order to

provide a guideline for otolaryngologists. Cross-sectional survey. A total of 108 tinnitus patients were submitted to a series of instruments, including Visual Analogue Scales (VAS), Tinnitus Handicap Inventory (THI), State Trait Anxiety Inventory Form Y (STAI-T), and Beck Depression Inventory (BDI). These instruments were chosen based on their psychometric properties, time of administration, and validity in many countries. Of the patients studied, 24 percent had severe tinnitus, 35 percent had anxiety disorders, and 13 percent had a depressive pathosis. Significant correlations between STAI-T and THI scores ($P < 0.001$), and between BDI and THI scores were shown ($P < 0.001$). The same results were found with VAS. If a patient reports a THI greater than 38, the otolaryngologist should supplement diagnostic studies with a psychological consultation.

Subject: Adult; Aged; Aged, 80 and over; *Anxiety: epidemiology; Comorbidity; Cross-Sectional Studies; *Depression: epidemiology; Female; Humans; Male; Middle Aged; *Questionnaires; *Tinnitus: psychology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Crocetti, Andrea

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 140

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Pages: 403-405

Number of pages: 3

Publication year: 2009

Year: 2009

Location: United States

ISSN: 0194-5998

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Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Journal Article

Subfile: Index Medicus

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Accession number: pmid-19248952

ProQuest document ID: 85390774

Document URL: <http://search.proquest.com/docview/85390774?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 54 of 100

Monaural diplacusis with tinnitus, aural fullness, hyperacusis, and sensorineural hearing loss.

Author: Brookler, Kenneth H11 Neurologic Associates, PC, New York, NY, USA.

Publication info: Ear, nose, & throat journal 88.2 (Feb 2009): 772-774.

[ProQuest document link](#)

Abstract: None available.

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Brookler, Kenneth H

Publication title: Ear, nose, & throat journal

Volume: 88

Issue: 2

Pages: 772-774

Number of pages: 3

Publication year: 2009

Year: 2009

ISSN: 0145-5613

eISSN: 1942-7522

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Case Reports, Journal Article

Subfile: Index Medicus

Update: 2010-04-13

Accession number: pmid-19224476

ProQuest document ID: 85300716

Document URL: <http://search.proquest.com/docview/85300716?accountid=50982>

Last updated: 2010-08-14

Database: ComDisDome

Document 55 of 100

Subjective idiopathic tinnitus and palliative care: a plan for diagnosis and treatment.

Author: Shulman, Abraham1; Goldstein, Barbara1 State University of New York, Downstate, 450 Clarkson Avenue, Box 1239, Brooklyn, NY, USA. metrc@inch.com

Publication info: Otolaryngologic clinics of North America 42.1 (Feb 2009): 15-37, vii.

[ProQuest document link](#)

Abstract: This article integrates the highlights of the authors' clinical experiences derived from existing protocols for tinnitus diagnosis and treatment with the evolving discipline of palliation medicine. Specifically, it demonstrates how the inclusion of principles of palliation medicine contributes to the efficacy of treatment.

Subject: Clinical Protocols; Electrodiagnosis; Humans; *Palliative Care; Quality of Life; *Tinnitus: diagnosis; Tinnitus: physiopathology; *Tinnitus: therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Shulman, Abraham

Publication title: Otolaryngologic clinics of North America

Volume: 42

Issue: 1

Pages: 15-37, vii

Number of pages: 24

Publication year: 2009

Year: 2009

Location: United States

ISSN: 0030-6665

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support, Review

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-19134487

ProQuest document ID: 85386050

Document URL: <http://search.proquest.com/docview/85386050?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 56 of 100

Principles and application of educational counseling used in progressive audiologic tinnitus management.

Author: Henry, James A1; Zaugg, Tara L; Myers, Paula J; Kendall, Caroline J; Turbin, Mitchel B1 VA RR and D National Center for Rehabilitative Auditory Research, VA Medical Center, Portland, Oregon, USA.

Publication info: Noise & health 11.42 (Jan 2009): 33-48.

[ProQuest document link](#)

Abstract: Exposure to loud sounds is a common cause and exacerbator of tinnitus - a troubling auditory symptom that affects millions of people worldwide. Clinical research at the National Center for Rehabilitative Auditory Research has resulted in a clinical model of tinnitus management referred to as Progressive Audiologic Tinnitus Management (PATM). The model involves five hierarchical levels of management: Triage, Audiologic Evaluation, Group Education, Tinnitus Evaluation, and Individualized Management. Counseling by audiologists and, as needed, mental health providers, is a key component of PATM. This style of counseling focuses less on didactic informational counseling; instead, counseling is used for facilitating patients' learning to adjust to the disturbing auditory symptom by successfully employing tools from two powerful skillsets for self-management of chronic tinnitus - the therapeutic uses of sound and techniques from cognitive-behavioral psychology. This article provides an overview of the methods of counseling used with PATM and provides details concerning the overarching principles of collaborative adult learning that are believed to be most important in facilitating self-management by patients who complain of tinnitus.

Subject: Adult; Behavior Therapy; Cognitive Therapy; Counseling; Humans; Music; Patient Education as Topic; Self Care; Sound; Speech; Tinnitus: diagnosis; Tinnitus: psychology; Tinnitus: rehabilitation; *Tinnitus: therapy; Triage

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Henry, James A

Publication title: Noise & health

Volume: 11

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Pages: 33-48

Number of pages: 16

Publication year: 2009

Year: 2009

Location: England

ISSN: 1463-1741

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Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, U.s. Gov't, Journal Article, Non-p.h.s., Research Support, Review

Subfile: Index Medicus

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Accession number: pmid-19265252

ProQuest document ID: 85391338

Document URL: <http://search.proquest.com/docview/85391338?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 57 of 100

Levodopa does not enhance the effect of low-frequency repetitive transcranial magnetic stimulation in tinnitus treatment.

Author: Kleinjung, Tobias¹; Steffens, Thomas; Landgrebe, Michael; Vielsmeier, Veronika; Frank, Elmar; Hajak, Göran; Strutz, Juergen; Langguth, Berthold¹ Department of Otorhinolaryngology, University of Regensburg, Regensburg, Germany. tobias.kleinjung@klinik.uni-regensburg.de

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 140.1 (Jan 2009): 92-95.

[ProQuest document link](#)

Abstract: Low-frequency repetitive transcranial magnetic stimulation (rTMS) has shown promise for the treatment of tinnitus. Experimental data from motor cortex stimulation in healthy subjects indicate that the suppressing effect of low-frequency rTMS can be enhanced by dopaminergic receptor activation. Here we investigated whether administration of the dopamine precursor levodopa before low-frequency rTMS enhances its efficacy in tinnitus treatment. Sixteen patients with chronic tinnitus received 100 mg of

levodopa before each session of low-frequency rTMS. Results were compared with a matched control group of 16 patients who received the same treatment, but without levodopa. Treatment outcome was assessed with a standardized tinnitus questionnaire. Both stimulation protocols resulted in a significant reduction of tinnitus scores after 10 days of stimulation; however, there was no significant difference between the two groups. Our data suggest that 100 mg of levodopa does not enhance the effect of rTMS in the treatment of tinnitus.

Subject: Chronic Disease; Dopamine Agents: administration & dosage; Dopamine Agents: pharmacology; Female; Humans; Levodopa: administration & dosage; *Levodopa: pharmacology; Male; Middle Aged; Motor Cortex: physiology; *Tinnitus: therapy; *Transcranial Magnetic Stimulation: methods

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kleinjung, Tobias

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 140

Issue: 1

Pages: 92-95

Number of pages: 4

Publication year: 2009

Year: 2009

Location: United States

ISSN: 0194-5998

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support

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Accession number: pmid-19130969

ProQuest document ID: 85381970

Document URL: <http://search.proquest.com/docview/85381970?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 58 of 100

The Portuguese version of Mini-Tinnitus Questionnaire: brief screening test for assessment of tinnitus-induced stress.

Author: Cerejeira, Rui1; Cerejeira, Joaquim; Paiva, Sofia; Gonçalves, Paulo; Firmino, Horácio; Quartilho, Manuel; Serra, Adriano Vaz; Paiva, António1 Department of Otolaryngology, Coimbra University Hospitals, Coimbra, Portugal. r.cerejeira@netcabo.pt

Publication info: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology 30.1 (Jan 2009): 112-115.

[ProQuest document link](#)

Abstract: HYPOTHESIS: The Portuguese version of Mini-Tinnitus Questionnaire (Mini-TQ) is as valid as the English version to assess tinnitus-associated distress in the Portuguese-speaking population. BACKGROUND: Tinnitus is a major symptom in ENT practice affecting subjects in all demographic groups. Our objective is to validate a Portuguese version of Mini-TQ (Mini-TQ-pv) to be used in clinical practice and research. METHODS: Mini-TQ-pv was administered to 51 patients with chronic tinnitus. Statistical analysis was done to determine the psychometric properties of the instrument. RESULTS: After double translation, face and content validity were confirmed by high internal consistency (Cronbach alpha = 0.861) and significant correlation between individual items and total score. The questionnaire was easy and quick to administer (2.57 min). CONCLUSION: We provide a suitable Mini-TQ-pv to be used in the assessment of Portuguese-speaking patients with tinnitus.

MeSH: Portugal, Severity of Illness Index, Questionnaires, Humans, Tinnitus -- etiology, Tinnitus -- physiopathology, Tinnitus -- psychology, Demography, Chronic Disease, Language, Disabled Persons -- psychology, Female, Male, Psychological Tests, Stress, Psychological (major) -- diagnosis, Stress, Psychological (major) -- etiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Cerejeira, Rui

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

Volume: 30

Issue: 1

Pages: 112-115

Number of pages: 4

Publication year: 2009

Year: 2009

ISSN: 1531-7129

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Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Journal Article

Subfile: Index Medicus

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Accession number: pmid-19092560

ProQuest document ID: 742778372

Document URL: <http://search.proquest.com/docview/742778372?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 59 of 100

Advancing tinnitus research: tales from a grand meeting at Grand Island, NY.

Author: Cacace, Anthony T

Publication info: American journal of audiology 17.2 (Dec 2008): 107.

[ProQuest document link](#)

Abstract: None available.

Subject: Animals; Humans; *Research; *Tinnitus: etiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Cacace, Anthony T

Publication title: American journal of audiology

Volume: 17

Issue: 2

Pages: 107

Number of pages: 1

Publication year: 2008

Year: 2008

Location: United States

ISSN: 1059-0889

Source type: Scholarly Journals

Format availability: Print

Language of publication: English (eng)

Document type: Editorial, Introductory Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-19056924

ProQuest document ID: 85406736

Document URL: <http://search.proquest.com/docview/85406736?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 60 of 100

Dorsal cochlear nucleus hyperactivity and tinnitus: are they related?

Author: Kaltenbach, James A1; Godfrey, Donald A1 Department of Neurosciences/Otolaryngology, Cleveland Clinic Foundation, Cleveland, OH 44195, USA. kaltenj@ccf.org

Publication info: American journal of audiology 17.2 (Dec 2008): S148-S161.

[ProQuest document link](#)

Abstract: PURPOSE: Eight lines of evidence implicating the dorsal cochlear nucleus (DCN) as a tinnitus contributing site are reviewed. We now expand the presentation of this model, elaborate on its essential details, and provide answers to commonly asked questions regarding its validity. CONCLUSIONS: Over the past decade, numerous studies have converged to support the hypothesis that the DCN may be an important brain center in the generation and modulation of tinnitus. Although other auditory centers have been similarly implicated, the DCN deserves special emphasis because, as a primary acoustic nucleus, it

occupies a potentially pivotal position in the hierarchy of functional processes leading to the emergence of tinnitus percepts. Moreover, because a great deal is known about the underlying cellular categories and the details of synaptic circuitry within the DCN, this brain center offers a potentially powerful model for probing mechanisms underlying tinnitus.

Subject: Animals; Auditory Fatigue: physiology; Auditory Pathways: physiopathology; *Cochlear Nucleus: physiopathology; Electric Stimulation; Hair Cells, Auditory: physiology; Hair Cells, Auditory, Outer: physiology; Humans; Nerve Net: physiopathology; Neuronal Plasticity: physiology; Noise: adverse effects; Psychoacoustics; Sound Spectrography; *Tinnitus: physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kaltenbach, James A

Publication title: American journal of audiology

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Pages: S148-S161

Number of pages: 1

Publication year: 2008

Year: 2008

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Document type: Journal Article, Review

Subfile: Index Medicus

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ProQuest document ID: 85409539

Document URL: <http://search.proquest.com/docview/85409539?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 61 of 100

Role of auditory cortex in noise- and drug-induced tinnitus.

Author: Eggermont, Jos J11 Department of Psychology, University of Calgary, 2500 University Drive NW, Calgary, Alberta T2N 1N4, Canada. eggermon@ucalgary.ca

Publication info: American journal of audiology 17.2 (Dec 2008): S162-S169.

[ProQuest document link](#)

Abstract: To elucidate the role of auditory cortex in tinnitus. Neurophysiological findings in cat auditory cortex following noise trauma or the application of salicylate and quinine, all expected to induce tinnitus, were reviewed. Those findings were interpreted in the context of what is expected from studies in humans, specifically in the brains of people with tinnitus. Tinnitus is an auditory percept to which several central

structures in the auditory system may contribute. Because the central auditory system has both feed-forward connections and feedback connections, it can be described as a set of nested loops. Once these loops become activated in a pathological fashion, as they may be in tinnitus, it becomes hard to assign importance to each contributing structure. Strongly interconnected networks, that is, neural assemblies, may be determining the quality of the tinnitus percept. It is unlikely that tinnitus is the expression of a set of independently firing neurons, and more likely that it is the result of a pathologically increased synchrony between sets of neurons. There is clear evidence for this from both evoked potentials and from neuron-pair synchrony measures.

Subject: Animals; *Auditory Cortex: drug effects; *Auditory Cortex: physiopathology; Auditory Pathways: drug effects; Auditory Pathways: physiopathology; Cats; Humans; Nerve Net: drug effects; Nerve Net: physiopathology; *Noise: adverse effects; Pitch Perception: physiology; Quinine; Risk Factors; Salicylates; Sound Spectrography; *Tinnitus: chemically induced; *Tinnitus: physiopathology

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Correspondence author: Eggermont, Jos J

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Mechanisms of synaptic plasticity in the dorsal cochlear nucleus: plasticity-induced changes that could underlie tinnitus.

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Abstract: PURPOSE: Tinnitus is the persistent perception of a subjective sound. Tinnitus is almost universally experienced in some forms. In most cases, recovery may occur in seconds, hours, or days. How does tinnitus shift from a transient condition to a lifelong disorder? Several lines of evidence, including clinical studies and animal models, indicate that the brain, rather than the inner ear, may in some cases be the site of maintenance of tinnitus. One hypothesis is that normal electrical activity in the auditory system becomes pathologically persistent due to plasticity-like mechanisms that can lead to long-term changes in the communication between neurons. A candidate site for the expression of this so-called synaptic plasticity is a region of the brainstem called the dorsal cochlear nucleus (DCN), a site of integration of acoustic and multimodal, sensory inputs. CONCLUSIONS: Here we review recent findings on cellular mechanisms observed in the DCN that can lead to long-term changes in the synaptic strength between different neurons in the DCN. These cellular mechanisms could provide candidate signaling pathways underlying the induction (ignition) and/or the expression (maintenance) of tinnitus.

Subject: Animals; Auditory Pathways: physiopathology; Calcium-Calmodulin-Dependent Protein Kinase Type 2: physiology; Chronic Disease; *Cochlear Nucleus: physiopathology; Humans; Long-Term Potentiation: physiology; Nerve Net: physiopathology; *Neuronal Plasticity: physiology; Receptor, Cannabinoid, CB1: physiology; Receptors, AMPA: physiology; Receptors, N-Methyl-D-Aspartate: physiology; Signal Transduction: physiology; *Synapses: physiology; *Tinnitus: physiopathology

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Identifying tinnitus subgroups with cluster analysis.

Author: Tyler, Richard¹; Coelho, Claudia; Tao, Pan; Ji, Haihong; Noble, William; Gehringer, Anne; Gogel, Stephanie¹ The University of Iowa, 200 Hawkins Drive, Iowa City, IA 52242, USA. rich-tyler@uiowa.edu

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Abstract: We believe it is important to uncover tinnitus subgroups to identify subsets of patients most likely to benefit from different treatments. We review strategies for subgrouping based on etiology, subjective reports, the audiogram, psychoacoustics, imaging, and cluster analysis. Preliminary results of a 2-step cluster analysis based on 246 participants from whom we had 26 categorical and 25 continuous variables were determined. A 4-cluster solution suggested the following subgroups: (a) constant distressing tinnitus, (b) varying tinnitus that is worse in noise, (c) tinnitus patients who are copers and whose tinnitus is not influenced by touch (somatic modulation), and (d) tinnitus patients who are copers but whose tinnitus is worse in quiet environments. Subgroups of tinnitus patients can be identified by using statistical approaches. The subgroups we identify here represent a preliminary attempt at identifying such patients. One next step would be to explore clinical trials of tinnitus treatments based on subgroup analyses or on using subgroups in the selection criteria.

Subject: *Cluster Analysis; Diagnosis, Differential; Humans; Psychoacoustics; Questionnaires; Sound Spectrography; *Tinnitus: classification; *Tinnitus: diagnosis; Tinnitus: etiology

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11(6):434-45[2073977], Cites: J Speech Hear Res. 1984 Sep; 27(3):466-74[6482416], Cites: J Speech Hear Disord. 1990 Aug; 55(3):439-53[2381186], Cites: J Speech Hear Res. 1984 Mar; 27(1):106-11[6716994], Cites: J Speech Hear Disord. 1983 May; 48(2):150-4[6621006], Cites: J Speech Hear Res. 1981 Jun; 24(2):257-61[7265941], Cites: Audiology. 1980; 19(6):519-35[7425956], Cites: Audiology. 1971 May-Jun; 10(3):138-44[5163656], Cites: J Neurophysiol. 2000 Feb; 83(2):1058-72[10669517]

Correspondence author: Tyler, Richard

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Gap detection methods for assessing salicylate-induced tinnitus and hyperacusis in rats.

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Publication info: American journal of audiology 17.2 (Dec 2008): S185-S192.

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Abstract: A variety of options for behavioral assessment of tinnitus in laboratory animals are available to

researchers today. These options are briefly reviewed, followed by data suggesting that gap detection procedures might be used to efficiently measure acute, salicylate-induced tinnitus and possibly hyperacusis in rats. Fischer Brown Norway rats (n = 10) were given intraperitoneal injections of 350 mg/kg sodium salicylate on 2 consecutive days, and the effects on gap detection were observed across 9 different frequency bands. Pretest, posttest, and washout data were collected. An additional 4 rats were each given 4 different doses of sodium salicylate (0, 150, 250, and 300 mg/kg), and gap detection and prepulse inhibition were measured. Significant gap detection deficits were observed from pre- to posttest that were consistent with tinnitus. Consistent gap detection deficits were found using broadband noise backgrounds, while significant improvements in responding to frequency-specific test bands were found. Similar effects were repeated in the dose response portion of the study. Gap detection procedures efficiently measured salicylate-induced changes in behavior that were consistent with the presence of tinnitus. In addition, the reliable, stronger responses at many frequencies after salicylate injections suggest the possibility of measuring a hyperacusis-like phenomenon using these methods.

Subject: Acoustic Stimulation; Animals; Attention: drug effects; *Hyperacusis: chemically induced; Injections, Intraperitoneal; Rats; Rats, Inbred BN; *Sodium Salicylate: toxicity; Sound Spectrography; Startle Reaction: drug effects; *Tinnitus: chemically induced; *Tinnitus: diagnosis

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Cross-modal interactions of auditory and somatic inputs in the brainstem and midbrain and their imbalance in tinnitus and deafness.

Author: Dehmel, S1; Cui, Y L; Shore, S E1 Kresge Hearing Research Institute, 1150 West Medical Center Drive, Room 5434A, Ann Arbor, MI 48109-5616, USA.

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Abstract: This review outlines the anatomical and functional bases of somatosensory influences on auditory processing in the normal brainstem and midbrain. It then explores how interactions between the auditory and somatosensory system are modified through deafness, and their impact on tinnitus is discussed. Literature review, tract tracing, immunohistochemistry, and in vivo electrophysiological recordings were used. Somatosensory input originates in the dorsal root ganglia and trigeminal ganglia, and is transmitted directly and indirectly through 2nd-order nuclei to the ventral cochlear nucleus, dorsal cochlear nucleus (DCN), and inferior colliculus. The glutamatergic somatosensory afferents can be segregated from auditory nerve inputs by the type of vesicular glutamate transporters present in their terminals. Electrical stimulation of the somatosensory input results in a complex combination of excitation and inhibition, and alters the rate and timing of responses to acoustic stimulation. Deafness increases the spontaneous rates of those neurons that receive excitatory somatosensory input and results in a greater sensitivity of DCN neurons to trigeminal stimulation. Auditory-somatosensory bimodal integration is already present in 1st-order auditory nuclei. The balance of excitation and inhibition elicited by somatosensory input is altered following deafness. The increase in somatosensory influence on auditory neurons when their auditory input is diminished could be due to cross-modal reinnervation or increased synaptic strength, and may contribute to mechanisms underlying somatic tinnitus.

Subject: Acoustic Stimulation; Afferent Pathways: physiopathology; Animals; *Attention: physiology; Auditory Pathways: physiopathology; *Auditory Perception: physiology; Brain Mapping; *Brain Stem: physiopathology; Cochlear Nucleus: physiopathology; *Deafness: physiopathology; Electric Stimulation; Ganglia, Spinal: physiopathology; Humans; Inferior Colliculi: physiopathology; *Mesencephalon: physiopathology; Neural Inhibition: physiology; Neuronal Plasticity: physiology; Neurons: physiology; *Sensation: physiology; Sensory Thresholds: physiology; Synaptic Transmission: physiology; *Tinnitus: physiopathology; Trigeminal Ganglion: physiopathology

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Neurophysiol. 1978 Jul; 41(4):837-47[681989], Cites: J Neurosci Res. 2004 Sep 15; 77(6):829-42[15334601], Cites: J Neurosci Res. 2004 Sep 15; 77(6):817-28[15334600], Cites: J Physiol. 2004 Jun 15; 557(Pt 3):843-61[15090602], Cites: Behav Brain Res. 2004 May 5; 151(1-2):331-6[15084450], Cites: Trends Neurosci. 2004 Feb; 27(2):104-10[15102490], Cites: J Comp Neurol. 2004 Feb 9; 469(3):391-412[14730590], Cites: Exp Brain Res. 2003 Dec; 153(4):643-8[14600798], Cites: Neuroscience. 2003; 119(4):1085-101[12831866], Cites: Brain Res Bull. 2003 Jun 15; 60(5-6):457-74[12787867], Cites: Brain Res. 2003 Jun 6; 974(1-2):236-42[12742642], Cites: Hear Res. 2003 Jan; 175(1-2):112-32[12527130], Cites: J Comp Neurol. 2003 Jan 6; 455(2):210-21[12454986], Cites: Audiol Neurootol. 2002 Nov-Dec; 7(6):370-5[12401968], Cites: J Comp Neurol. 2002 Sep 23; 451(3):250-66[12210137], Cites: J Neurosci. 2002 Jul 1; 22(13):5442-51[12097496], Cites: J Neurosci. 2002 Apr 1; 22(7):2826-34[11923447], Cites: Neurosci Lett. 2002 Feb 8; 319(1):41-4[11814649], Cites: J Neurosci. 2002 Jan 1; 22(1):142-55[11756497], Cites: J Physiol. 2001 Dec 1; 537(Pt 2):553-66[11731585], Cites: J Neurosci. 2001 Oct 1; 21(19):7848-58[11567076], Cites: Neurol Res. 2001 Sep; 23(6):565-72[11547923], Cites: Neuron. 2001 Aug 2; 31(2):247-60[11502256], Cites: J Comp Neurol. 2001 Jul 30; 436(3):290-303[11438931], Cites: Brain Res Brain Res Rev. 2000 Dec; 34(3):149-56[11113505], Cites: Behav Brain Res. 2000 Dec 5; 116(2):197-210[11080551], Cites: Hear Res. 2000 Sep; 147(1-2):282-92[10962192], Cites: J Comp Neurol. 2000 Apr 10; 419(3):271-85[10723004], Cites: Am J Otolaryngol. 1999 Nov-Dec; 20(6):351-62[10609479], Cites: Eur J Neurosci. 2008 Jan; 27(1):155-68[18184319], Cites: Prog Brain Res. 2007; 166:195-207[17956783], Cites: Prog Brain Res. 2007; 166:107-23[17956776], Cites: Brain Struct Funct. 2007 Sep; 212(2):121-32[17717687], Cites: J Commun Disord. 2007 Jul-Aug; 40(4):313-34[17418230], Cites: J Comp Neurol. 2007 Oct 10; 504(5):583-98[17701985], Cites: J Comp Neurol. 2007 Feb 1; 500(4):777-87[17154258], Cites: Otol Neurotol. 2007 Feb; 28(2):178-84[17255884], Cites: J Neurosci. 2006 Nov 15; 26(46):12055-66[17108179], Cites: Prog Brain Res. 2006; 157:365-72[17046676], Cites: Hear Res. 2006 Jun-Jul; 216-217:216-23[16597491], Cites: J Comp Neurol. 2006 Aug 1; 497(4):589-99[16739167], Cites: J Comp Neurol. 2006 May 20; 496(3):335-48[16566003], Cites: Neurosci Lett. 2006 Feb 27; 395(1):71-5[16298057], Cites: J Comp Neurol. 2006 Mar 1; 495(1):100-12[16432905], Cites: Drug Discov Today. 2005 Oct 1; 10(19):1283-90[16214672], Cites: Hear Res. 2005 Aug; 206(1-2):200-26[16081009], Cites: Eur J Neurosci. 2005 Jun; 21(12):3334-48[16026471], Cites: J Neurosci. 2005 Jul 13; 25(28):6499-508[16014711], Cites: J Comp Neurol. 2005 Apr 4; 484(2):191-205[15736230], Cites: J Neurosci Res. 2004 Dec 15; 78(6):901-7[15495211], Cites: Trends Cogn Sci. 2004 Apr; 8(4):162-9[15050512], Cites: J Physiol. 1963 Aug; 168:129-46[14056482], Cites: Brain Behav Evol. 1997; 50 Suppl 1:17-31[9217991], Cites: J Comp Neurol. 1999 Jun 14; 408(4):515-31[10340502], Cites: Hear Res. 1999 Apr; 130(1-2):75-93[10320100], Cites: Exp Brain Res. 1998 Nov; 123(1-2):124-35[9835401], Cites: Neuroscience. 1998 May; 84(2):559-67[9539226], Cites: Curr Biol. 1998 Mar 12; 8(6):R190[9512426]

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The additive effect of co-occurring anxiety and depression on health status, quality of life and coping strategies in help-seeking tinnitus sufferers.

Author: Bartels, H1; Middel, B L; van der Laan, B F A M; Staal, M J; Albers, F W J1 Department of Otorhinolaryngology, University Medical Center Groningen, University of Groningen, The Netherlands.

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Abstract: OBJECTIVE: Evaluating the effect of anxiety and depression on clinical measures of general health, tinnitus-specific quality of life, and coping abilities. DESIGN: Two hundred sixty-five chronic, subjective tinnitus sufferers were divided into four psychological symptom groups according to cut-off scores on anxiety and depression subscales of the Hospital Anxiety and Depression Scale: (1) no-symptoms, (2) anxiety-only, (3) depression-only, and (4) anxiety-plus-depression. General health-related quality of life (SF-36), tinnitus-specific quality of life (tinnitus reaction questionnaire and tinnitus handicap inventory), and coping abilities (tinnitus coping style questionnaire) were assessed and analyzed across these four psychological symptom groups, which did not differ on age, gender, marital, and working status. RESULTS: Statistically significant and clinically relevant differences on general health-related and tinnitus-specific quality of life and coping abilities were identified when comparing anxiety-plus-depression subgroup with the subgroups anxiety-only, depression-only, or no-symptoms. Highest associations were seen between the anxiety-plus-depression subgroup and impaired quality of life and maladaptive coping. CONCLUSIONS: Our results demonstrate the additive effect of both anxiety and depression in impairing general health-related and tinnitus-specific quality of life and application of coping strategies, and reiterate the need for investigating both symptoms in the clinical evaluation of tinnitus patients.

MeSH: Questionnaires, Humans, Health Status, Quality of Life, Aged, Affective Symptoms, Multivariate Analysis, Logistic Models, Adult, Middle Aged, Female, Male, Depression (major) -- complications, Anxiety (major) -- complications, Tinnitus (major) -- complications, Tinnitus (major) -- psychology, Adaptation, Psychological (major)

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Re: Maintenance repetitive transcranial magnetic stimulation can inhibit the return of tinnitus.

Author: Langguth, Berthold; Landgrebe, Michael; Hajak, Göran; Kleinjung, Tobias

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Abstract: None available.

MeSH: Frontal Lobe -- physiopathology, Questionnaires, Patient Satisfaction, Humans, Temporal Lobe -- physiopathology, Long-Term Care, Energy Metabolism -- physiology, Tinnitus -- physiopathology, Tinnitus -- therapy, Retreatment, Recurrence -- prevention & control, Transcranial Magnetic Stimulation (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Supplemental data: Comment On: Laryngoscope. 2008 Jul; 118(7):1228-32[18475211]

Correspondence author: Langguth, Berthold

Publication title: The Laryngoscope

Volume: 118

Issue: 12

Pages: 2264; author reply 2264-5

Publication year: 2008

Year: 2008

ISSN: 0023-852X

eISSN: 1531-4995

Source type: Other Sources

Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Comment, Letter

Subfile: Index Medicus

Update: 2010-04-13

Accession number: pmid-19057280

ProQuest document ID: 742775476

Document URL: <http://search.proquest.com/docview/742775476?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 68 of 100

An approach to tinnitus management.

Author: Brookler, Kenneth H1; Hamid, Mohamed A1 Neurologic Associates, PC, New York, NY, USA.

Publication info: Ear, nose, & throat journal 87.11 (Nov 2008): 616-621.

[ProQuest document link](#)

Abstract: None available.

MeSH: Vitamin D Deficiency -- complications, Vitamin D Deficiency -- drug therapy, Otoacoustic Emissions, Spontaneous, Vitamins -- therapeutic use, Humans, Middle Aged, Male, Cholecalciferol (major) -- therapeutic use, Otosclerosis (major) -- complications, Otosclerosis (major) -- drug therapy, Otosclerosis (major) -- etiology, Tinnitus (major) -- diagnosis, Tinnitus (major) -- drug therapy, Tinnitus (major) -- etiology, Tinnitus (major) -- pathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Brookler, Kenneth H

Publication title: Ear, nose, & throat journal

Volume: 87

Issue: 11

Pages: 616-621

Number of pages: 6

Publication year: 2008

Year: 2008

ISSN: 0145-5613

eISSN: 1942-7522

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Case Reports, Journal Article

Subfile: Index Medicus

Publication history :

Revised date: 20 May 2009

Update: 2010-04-13

Accession number: pmid-19006060

ProQuest document ID: 85305403

Document URL: <http://search.proquest.com/docview/85305403?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 69 of 100

Neural tonotopy in cochlear implants: an evaluation in unilateral cochlear implant patients with unilateral deafness and tinnitus.

Author: Vermeire, Katrien1; Nobbe, Andrea; Schleich, Peter; Nopp, Peter; Voormolen, Maurits H; Van de Heyning, Paul H1 C. Doppler Laboratory for Active Implantable Systems, Institute of Ion Physics and Applied Physics, University of Innsbruck, Innsbruck, Austria. katrien.vermeire@uibk.ac.at

Publication info: Hearing research 245.1-2 (Nov 2008): 98-106.

[ProQuest document link](#)

Abstract: In cochlear implants, the signal is filtered into different frequency bands and transmitted to electrodes along the cochlea. In this study the frequency-place function for electric hearing was investigated as a means to possibly improve speech coding by delivering information to the appropriate cochlear place. Fourteen subjects with functional hearing in the contralateral ear have been provided with a MED-EL cochlear implant in the deaf ear in order to reduce intractable tinnitus. Pitch scaling experiments were performed using single-electrode, constant-amplitude, constant-rate stimuli in the implanted ear, and acoustic sinusoids in the contralateral ear. The frequency-place function was calculated using the electrode position in the cochlea as obtained from postoperative skull radiographs. Individual frequency-place functions were compared to Greenwood's function in normal hearing. Electric stimulation elicited a low pitch in the apical region of the cochlea, and shifting the stimulating electrode towards the basal region elicited increasingly higher pitch. The frequency-place function did not show a significant shift relative to Greenwood's function. In cochlear implant patients with functional hearing in the non-implanted ear, electrical stimulation produced a frequency-place function that on average resembles Greenwood's function. These results differ from previously derived data.

Subject: Acoustic Stimulation; Adult; Aged; Cochlea: radiography; Cochlear Implants: statistics & numerical data; *Deafness: complications; Deafness: physiopathology; *Deafness: therapy; Electric Stimulation; Hearing Loss, Sensorineural: complications; Hearing Loss, Sensorineural: physiopathology; Hearing Loss, Sensorineural: therapy; Humans; Loudness Perception; Middle Aged; Pitch Perception; Signal Processing, Computer-Assisted; *Tinnitus: etiology; Tinnitus: physiopathology; *Tinnitus: therapy; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Vermeire, Katrien

Publication title: Hearing research

Volume: 245

Issue: 1-2

Pages: 98-106

Number of pages: 9

Publication year: 2008

Year: 2008

Location: Netherlands

ISSN: 0378-5955

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Journal Article, Evaluation Studies

Subfile: Index Medicus

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Accession number: pmid-18817861

ProQuest document ID: 85403371

Document URL: <http://search.proquest.com/docview/85403371?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 70 of 100

Management of high jugular bulb with tinnitus: transvenous stent-assisted coil embolization.

Author: Yoon, Bit-Na1; Lee, Tae-Hong; Kong, Soo-Keun; Chon, Kyong-Myong; Goh, Eui-Kyung1
Department of Otorhinolaryngology, Pusan National University School of Medicine, Busan, Korea.

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 139.5 (Nov 2008): 740-741.

[ProQuest document link](#)

Abstract: None available.

Subject: Adult; *Angioplasty; Cranial Sinuses: radiography; *Embolization, Therapeutic; Female; Humans; *Jugular Veins: abnormalities; *Stents; *Tinnitus: etiology; Tinnitus: radiography; Tinnitus: therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Yoon, Bit-Na

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 139

Issue: 5

Pages: 740-741

Number of pages: 2

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0194-5998

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Case Reports, Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18984278

ProQuest document ID: 85402812

Document URL: <http://search.proquest.com/docview/85402812?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 71 of 100

Treatment of tinnitus with a customized, dynamic acoustic neural stimulus: clinical outcomes in general private practice.

Author: Hanley, Peter J1; Davis, Paul B; Paki, Bardia; Quinn, Shaunine A; Bellekom, Sandra R1
Neuromonics Pty Limited, Chatswood, Australia.

Publication info: The Annals of otology, rhinology, and laryngology 117.11 (Nov 2008): 791-799.

[ProQuest document link](#)

Abstract: We evaluate the relative effectiveness of a newly available tinnitus treatment approach for different categories of patients in general private practice. This was a cohort study, sponsored by Neuromonics, involving the first 470 patients to undertake the Neuromonics Tinnitus Treatment in 7 Neuromonics tinnitus clinics. All patients were provided with a dynamic acoustic neural stimulus, customized to each patient's audiometric profile, for daily use as part of a structured rehabilitation program. Tinnitus disturbance was assessed before, during, and after treatment with the Tinnitus Reaction Questionnaire. The outcomes displayed a relation with patients' suitability according to predefined criteria: among the most suitable patients (tier 1 cohort), 92% exceeded the threshold for success (defined as a reduction in tinnitus-related disturbance of at least 40%), and the mean improvement in tinnitus disturbance was 72%; the discontinuance rate was 4%. For other suitability categories, the success rates and mean improvements were somewhat lower, and the discontinuance rates higher (tier 2: 60%, 49%, and 16%, respectively; tier 3: 39%, 32%, and 17%, respectively). The results showed that the treatment is effective for suitable patients in the private practice setting, and they provide health-care professionals with guidance as to what patients might expect from treatment, depending on their degree of suitability.

Subject: *Acoustic Stimulation: methods; Adult; Aged; Aged, 80 and over; Audiometry; Auditory Threshold: physiology; Female; Follow-Up Studies; Humans; Male; Middle Aged; *Private Practice; Questionnaires; Tinnitus: physiopathology; *Tinnitus: therapy; Treatment Outcome; Young Adult

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Hanley, Peter J

Publication title: The Annals of otology, rhinology, and laryngology

Volume: 117

Issue: 11

Pages: 791-799

Number of pages: 9

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0003-4894

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, Non-u.s. Gov't, Controlled Clinical Trial, Multicenter Study, Journal Article, Research Support

Update: 2011-12-15

Accession number: pmid-19102123

ProQuest document ID: 85411039

Document URL: <http://search.proquest.com/docview/85411039?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 72 of 100

Personality and perception of tinnitus.

Author: Welch, David1; Dawes, Patrick J D1 Dunedin Multidisciplinary Health and Development Research Unit, Department of Preventive and Social Medicine, Dunedin School of Medicine, University of Otago, PO Box 913, Dunedin, New Zealand. david.welch@dmhdru.otago.ac.nz

Publication info: Ear and hearing 29.5 (Oct 2008): 684-692.

[ProQuest document link](#)

Abstract: OBJECTIVES: Tinnitus has high prevalence and a wide range of etiologies and of impacts on sufferers. Our objective was to develop understanding of the role of personality in the perception of tinnitus in the general population. As a theoretical basis for this, we combined elements of a general model of signal detection with the ideas of ignition (development) and promotion (neural transmission) of tinnitus, and considered plausible roles for personality factors within this conceptual framework. DESIGN: We interviewed a birth cohort of 970 people aged 32 yr sampled from the general population. On the basis of questioning, we divided them into three groups, those without tinnitus, those with occasional tinnitus (including those with transient tinnitus of very brief duration), and those who experienced tinnitus most of the time. We also established how annoying or distressing the tinnitus was, and assessed personality using the Multidimensional Personality Questionnaire. RESULTS: Tinnitus was experienced rarely by 38.2% and half the time or more by 6.8% of those studied. Men and women did not differ in the amount of tinnitus reported, but women were more likely to find it annoying. People from lower socioeconomic backgrounds were more likely to report tinnitus. People with tinnitus were more socially withdrawn, reactive to stress, alienated, and less Self-Controlled. People who were more annoyed by tinnitus were

more socially withdrawn, and men were more stress reactive and alienated. **CONCLUSIONS:** Our interpretation of the findings is that personality influences the persistence of tinnitus by influencing the tendency to be aware of it. Consideration of personality factors may improve the ability to tailor tinnitus therapies, and the concept of awareness may benefit treatment outcomes by showing tinnitus sufferers a means of internalizing the locus of control over their symptoms.

MeSH: Questionnaires, Social Alienation, Humans, Social Behavior, Personality Inventory, Tinnitus -- epidemiology, Tinnitus -- psychology, Stress, Psychological -- epidemiology, Stress, Psychological -- psychology, Adult, Cohort Studies, Female, Male, Prevalence, Attitude to Health (major), Personality (major), Auditory Perception (major)

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Welch, David

Publication title: Ear and hearing

Volume: 29

Issue: 5

Pages: 684-692

Number of pages: 9

Publication year: 2008

Year: 2008

ISSN: 0196-0202

eISSN: 1538-4667

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Journal Article, Research Support, N.I.H., Extramural, Research Support, Non-U.S. Gov't

Subfile: Index Medicus

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Accession number: pmid-18596645

ProQuest document ID: 742780779

Document URL: <http://search.proquest.com/docview/742780779?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 73 of 100

Pulsatile tinnitus associated with internal carotid artery morphologic abnormalities.

Author: Sismanis, Aristides¹; Girevendoulis, Alexander¹ Department of Otolaryngology-Head, Virginia Commonwealth University Medical Center, Richmond, Virginia, USA. asismanis@aol.com

Publication info: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 29.7 (Oct 2008): 1032-1036.

[ProQuest document link](#)

Abstract: OBJECTIVES: Internal carotid artery morphologic abnormalities mainly consist of tortuosities and coilings and can present with pulsatile tinnitus (PT). The purpose of this presentation is to report 3 representative cases and propose clinical and radiologic diagnostic criteria. PATIENTS: Three patients presenting with PT. INTERVENTION: Clinical evaluation including auscultation of the ear canal and head and neck. All patients underwent computed tomography angiography of the head and neck. MAIN OUTCOME MEASURES: Clinical evaluation, computed tomography angiography of the head and neck. RESULTS: Head bruit or objective tinnitus were detected in 2 patients. Symptoms of cerebral ischemia were absent. All patients were found to have tortuosities of the internal carotid arteries below the cranium base. One patient, in addition to tortuosity, had coiling as well. CONCLUSION: Morphologic abnormalities of the internal carotid artery may be associated with PT. Proper clinical evaluation coupled with computed tomography angiography of the head and neck can differentiate these abnormalities from other more serious vascular etiologies. Symptoms of cerebral ischemia warrant consultation with a vascular surgeon.

MeSH: Carotid Stenosis -- complications, Carotid Stenosis -- radiography, Carotid Stenosis -- surgery, Cerebral Angiography, Cerebral Infarction -- complications, Humans, Carotid Artery, Internal -- abnormalities, Carotid Artery, Internal -- radiography, Carotid Artery, Internal -- surgery, Tomography, X-Ray Computed, Brain Ischemia -- complications, Carotid Artery Diseases -- complications, Carotid Artery Diseases -- radiography, Carotid Artery Diseases -- surgery, Tinnitus -- etiology, Tinnitus -- radiography, Tinnitus -- surgery, Cerebrovascular Disorders -- radiography, Cerebrovascular Disorders -- surgery, Auscultation

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Sismanis, Aristides

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

Volume: 29

Issue: 7

Pages: 1032-1036

Number of pages: 5

Publication year: 2008

Year: 2008

ISSN: 1531-7129

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Document type: Journal Article

Subfile: Index Medicus

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Accession number: pmid-18818546

ProQuest document ID: 742780538

Document URL: <http://search.proquest.com/docview/742780538?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 74 of 100

Hearing aids and tinnitus therapy: a 25-year experience.

Author: Trotter, M I1; Donaldson, I1 ENT Department, University Hospital Birmingham, UK.
Matthew.Trotter@eyeandear.org.au

Publication info: The Journal of laryngology and otology 122.10 (Oct 2008): 1052-1056.

[ProQuest document link](#)

Abstract: OBJECTIVES: (1) To assess the subjective tinnitus perception of patients with audiological proven hearing loss presenting to a tinnitus clinic, both before and after hearing aid provision; (2) to investigate subjective tinnitus perception in patients with unilateral and bilateral hearing loss; and (3) to assess the impact on tinnitus perception, if any, of a digital hearing aid programme in patients provided with hearing aids. DESIGN: Prospective data collection for patients attending a tinnitus clinic over a 25-year period (1980-2004). SETTING: University teaching hospital otolaryngology department. PARTICIPANTS: A total of 2153 consecutive patients attending a consultant-delivered specialist tinnitus clinic. MAIN OUTCOMES MEASURES: A visual analogue scale was used to assess the degree of tinnitus perception improvement, if any, comparing before versus after unilateral or bilateral aiding (in those with audiometrically proven hearing loss). A further assessment compared the effect of digital hearing aid programme introduction on symptomatic tinnitus perception in patients provided with unilateral or bilateral aids. RESULTS: A total of 1440 patients were given hearing aids (826 unilateral and 614 bilateral). There was little difference in tinnitus perception, comparing overall aiding results in unilaterally or bilaterally aided patients. Overall, 554 (67 per cent) of unilaterally aided patients and 424 (69 per cent) of bilaterally aided patients reported some improvement in their tinnitus perception following aiding. There was a statistically significant improvement in tinnitus perception, comparing analogue aids with digital hearing aids, following introduction of a digital hearing aid programme in 2000, in both unilaterally ($p < 0.001$) and bilaterally ($p < 0.001$) aided patients. CONCLUSIONS: Provision of hearing aids in patients with audiometrically demonstrable hearing loss can play a very important part in tinnitus control. The additional improvement in tinnitus control observed following introduction of programmable digital aids had a summative effect in the management of these patients.

MeSH: Questionnaires, Prospective Studies, Patient Satisfaction, Perception, Humans, Pain Measurement, Hearing Aids, Tinnitus -- diagnosis, Tinnitus -- rehabilitation, Male, Female, Hearing Loss (major) -- rehabilitation

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Trotter, M I

Publication title: The Journal of laryngology and otology

Volume: 122

Issue: 10

Pages: 1052-1056

Number of pages: 5

Publication year: 2008

Year: 2008

ISSN: 0022-2151

eISSN: 1748-5460

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Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Journal Article

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Accession number: pmid-18353195

ProQuest document ID: 742778535

Document URL: <http://search.proquest.com/docview/742778535?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 75 of 100

Tinnitus aurium in persons with normal hearing: 55 years later.

Author: Del Bo, Luca¹; Forti, Stella; Ambrosetti, Umberto; Costanzo, Serena; Mauro, Davide; Ugazio, Gregorio; Langguth, Berthold; Mancuso, Antonio¹ Fondazione Ascolta e Vivi, Milan, Italy. delbo@sordita.it

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 139.3 (Sep 2008): 391-394.

[ProQuest document link](#)

Abstract: The aim of this study was to investigate the effect of silence on the appearance of auditory phantom perceptions in normal-hearing adults, with specific emphasis on the influence of suggestion. Cross-sectional survey. Fifty-three normal-hearing young Caucasian adults were subjected to two 4-minute sessions in an anechoic sound chamber. In the first session the chamber was empty; in the second session the chamber contained a nonfunctioning loudspeaker. At the end of each session, subjects had to indicate which sounds they perceived from a list of 23 different sounds. When the loudspeaker was not present, 83 percent of the participants reported that they experienced at least one sound, and the percentage increased to 92 percent when the loudspeaker was present. These results confirm the emergence of tinnituslike perceptions in a nonclinical population in a silent environment and indicate that suggestive mechanisms play only a minor role in their generation.

Subject: Adult; Cross-Sectional Studies; Female; Humans; Male; Suggestion; *Tinnitus: epidemiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Del Bo, Luca

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 139

Issue: 3

Pages: 391-394

Number of pages: 4

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0194-5998

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Document type: Journal Article

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Accession number: pmid-18722219

ProQuest document ID: 85396992

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Last updated: 2012-07-13

Database: ComDisDome

Document 76 of 100

Incapacitating unilateral tinnitus in single-sided deafness treated by cochlear implantation.

Author: Van de Heyning, Paul¹; Vermeire, Katrien; Diebl, Martina; Nopp, Peter; Anderson, Ilona; De Ridder, Dirk¹ Department of Otorhinolaryngology-Head and Neck Surgery, University Hospital Antwerp, University of Antwerp, Antwerp, Belgium.

Publication info: The Annals of otology, rhinology, and laryngology 117.9 (Sep 2008): 645-652.

[ProQuest document link](#)

Abstract: Tinnitus is a well-known, difficult-to-treat symptom of hearing loss. Users of cochlear implants (CIs) have reported a reduction in tinnitus following implantation for bilateral severe-to-profound deafness. This study assessed the effect of electrical stimulation via a CI on tinnitus in subjects with unilateral deafness and ipsilateral tinnitus who underwent implantation in an attempt to treat tinnitus with the CI. Twenty-one subjects who complained of severe intractable tinnitus that was unresponsive to treatment received a CI. Tinnitus loudness was measured with a Visual Analog Scale; loudness percepts were recorded with the device activated and deactivated. Tinnitus distress was measured with the Tinnitus Questionnaire before and after implantation. Electrical stimulation via a CI resulted in a significant reduction in tinnitus loudness (mean +/- SD; 1 year after implantation, 2.4 +/- 1.8; 2 years after implantation, 2.5 +/- 1.9; before implantation, 8.5 +/- 1.3). With the device deactivated, tinnitus loudness was still reduced to between 6.1 and 7.0 over 24 months. The Tinnitus Questionnaire revealed a significant positive effect of CI stimulation. Unilateral tinnitus resulting from single-sided deafness can be treated with electrical stimulation via a CI. The outcomes of this pilot study demonstrate a new method for treatment of tinnitus in select subjects, perhaps an important new indication for cochlear implantation.

Subject: Adult; Aged; Audiometry; *Cochlear Implantation; *Deafness: complications; Female; Humans; Male; Middle Aged; Pain Measurement; Tinnitus: diagnosis; *Tinnitus: surgery

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Van de Heyning, Paul

Publication title: The Annals of otology, rhinology, and laryngology

Volume: 117

Issue: 9

Pages: 645-652

Number of pages: 8

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0003-4894

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support

Update: 2011-12-15

Accession number: pmid-18834065

ProQuest document ID: 85401742

Document URL: <http://search.proquest.com/docview/85401742?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 77 of 100

Maintenance repetitive transcranial magnetic stimulation can inhibit the return of tinnitus.

Author: Mennemeier, Mark¹; Chelette, Kenneth C; Myhill, Jeffery; Taylor-Cooke, Patricia; Bartel, Twyla; Triggs, William; Kimbrell, Timothy; Dornhoffer, John¹ Department of Neurobiology and Developmental Science, University of Arkansas for Medical Sciences, Little Rock, Arkansas 72205, USA.
msmennemeier@uams.edu

Publication info: The Laryngoscope 118.7 (Jul 2008): 1228-1232.

[ProQuest document link](#)

Abstract: OBJECTIVES/HYPOTHESIS: A single patient was tested to examine the safety and feasibility of using maintenance sessions of low-frequency repetitive transcranial magnetic stimulation (1 Hz rTMS) to reduce tinnitus loudness and prevent its return over time. STUDY DESIGN: Interrupted time series with multiple replications. METHODS: Tinnitus loudness was assessed using a visual analogue rating (VAR) with 0 = no tinnitus, and 100 = loudest tinnitus experienced; 1,800 TMS pulses delivered at 1 Hz and 110% of motor threshold were administered over the posterior, superior lateral temporal gyrus of the subject's right hemisphere until subjective tinnitus fell to a VAR of 25. TMS was reapplied as tinnitus returned to a VAR of 25 or higher. Cerebral metabolism was measured using positron emission tomography before and after treatment. RESULTS: In this patient, tinnitus could be reduced to a VAR of 6 or lower each time it reoccurred using one to three maintenance sessions of rTMS. Tinnitus loudness remained at or below a VAR of 25 and was reported to be unobtrusive in daily life when last assessed 4 months after the third and final round of maintenance treatment. Asymmetric increased cerebral metabolism in the right hemisphere reduced following treatment and as tinnitus improved. Maintenance treatment was well tolerated with no side effects. CONCLUSIONS: Although a case study cannot establish treatment efficacy, this study demonstrates for the first time that it is feasible to use maintenance rTMS to manage chronic tinnitus. Maintenance rTMS might impede cortical expansion of the tinnitus frequency into adjacent cortical areas, but group studies are necessary to confirm this speculation.

MeSH: Positron-Emission Tomography, Humans, Equipment Safety, Pain Measurement, Dominance, Cerebral -- physiology, Energy Metabolism -- physiology, Tinnitus -- physiopathology, Tinnitus -- rehabilitation, Recurrence -- prevention & control, Feasibility Studies, Adult, Temporal Lobe -- physiopathology, Retreatment, Male, Transcranial Magnetic Stimulation (major) -- methods

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Supplemental data: Comment In: Laryngoscope. 2008 Dec; 118(12):2264; author reply 2264-5[19057280]

Correspondence author: Mennemeier, Mark

Publication title: The Laryngoscope

Volume: 118

Issue: 7

Pages: 1228-1232

Number of pages: 5

Publication year: 2008

Year: 2008

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Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Case Reports, Journal Article, Research Support, N.I.H., Extramural, Research Support, Non-U.S. Gov't

Subfile: Index Medicus

Publication history :

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Document URL: <http://search.proquest.com/docview/742780307?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 78 of 100

Establishing a tinnitus clinic in your practice.

Author: Tyler, Richard S1; Haskell, George B; Gogel, Stephanie A; Gehringer, Anne K1 University of Iowa, Department of Otolaryngology, 200 Hawkins Drive, 21167 PFP, Iowa City, IA 52242, USA.

rich-tyler@uiowa.edu

Publication info: American journal of audiology 17.1 (Jun 2008): 25-37.

[ProQuest document link](#)

Abstract: While tinnitus is very common among the hearing impaired population, specific treatment for tinnitus is not provided in most clinics. This article provides a plan for establishing a tinnitus treatment program that can be implemented in stages at most audiology clinics. Preparation for establishing a tinnitus clinic includes having an overall plan regarding the type and degree of tinnitus management. Assessment involves a measurement of tinnitus and of the reaction a patient has to the tinnitus, including the use of handicap questionnaires. Management typically involves some form of counseling and sound therapy. Four problematic areas in tinnitus management are thoughts and emotions, hearing and communication, sleep, and concentration. Licensed audiologists generally have the essential training necessary to provide counseling and sound therapy to treat tinnitus patients. We introduce 3 levels of treatment implementation, depending on whether the patient is curious, concerned, or distressed. Follow-up and referrals might be necessary in more severe cases. Finally, the development of a tinnitus clinic centers around establishing a

need for individual treatment, creating a treatment plan, estimating the need for additional staff and resources, reimbursement options, and assessing the effectiveness of the program.

Subject: *Audiology: organization & administration; Counseling; Health Planning Guidelines; Hearing Aids; Humans; Otolaryngology: methods; *Physician's Practice Patterns; Referral and Consultation; *Tinnitus: diagnosis; *Tinnitus: therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Tyler, Richard S

Publication title: American journal of audiology

Volume: 17

Issue: 1

Pages: 25-37

Number of pages: 13

Publication year: 2008

Year: 2008

Location: United States

ISSN: 1059-0889

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Last updated: 2012-07-13

Database: ComDisDome

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Comparison of auditory brainstem response results in normal-hearing patients with and without tinnitus.

Author: Kehrle, Helga M1; Granjeiro, Ronaldo C; Sampaio, André L L; Bezerra, Roberta; Almeida, Vanessa F; Oliveira, Carlos A1 Department of Otolaryngology, Hospital de Base de Brasília, SQSW 306, Bloco A, Ap 208, Bairro Sudoeste, Brasília DF 70673431, Brazil. helgak1@terra.com.br

Publication info: Archives of otolaryngology--head & neck surgery 134.6 (Jun 2008): 647-651.

[ProQuest document link](#)

Abstract: OBJECTIVE: To evaluate electrophysiologically the auditory nerve and the auditory brainstem function of patients with tinnitus and normal-hearing thresholds using the auditory brainstem response (ABR). DESIGN: Case-control study. SETTING: Ambulatory section of the Department of Otolaryngology, Hospital de Base de Brasília. PATIENTS: Thirty-seven individuals with tinnitus and 38 without tinnitus, with ages ranging from 20 to 45 years and pure-tone thresholds of 25 dB or better at frequencies between 500

and 8000 Hz. MAIN OUTCOME MEASURES: We compared the latencies of waves I, III, and V; the interpeak intervals I-III, III-V, and I-V; the interaural latency difference (wave V); and the V/I amplitude ratio between the 2 groups. RESULTS: Among the 37 patients in the study group, abnormal results were found in 16 (43%) in at least 1 of the 8 parameters evaluated. When we analyzed the latencies, although the values were on average in the normal range used in the present study, the tinnitus group presented a significant prolongation of the latencies of waves I, III, and V when compared with the control group. Furthermore, we found the interpeak I-III, III-V, and I-V values to be within the normal limits, but the interpeak III-V value was significantly ($P = .003$) enlarged in the study group compared with the control group. The V/I amplitude ratio found in the tinnitus group was within normal limits; however, a significant ($P = .004$) difference was found when the 2 groups were compared. The averages of the interaural latency difference (wave V) did not show significant differences in relation to the control group. CONCLUSIONS: We conclude that, although the averages obtained in several analyzed parameters were within normal limits, the ABR results from the patients with and without tinnitus and normal hearing are different, suggesting that ABR might contribute to the workup of these patients. Our data show that there are changes in the central pathways in the study group. The meaning of these changes must be further investigated.

MeSH: Audiometry, Pure-Tone, Humans, Adult, Case-Control Studies, Middle Aged, Hearing -- physiology, Evoked Potentials, Auditory, Brain Stem (major) -- physiology, Cochlear Nerve (major) -- physiology, Cochlear Nerve (major) -- physiopathology, Tinnitus (major) -- physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kehrlé, Helga M

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Document type: Comparative Study, Journal Article

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Last updated: 2010-09-25

Database: ComDisDome

Treatment of tinnitus with a customized acoustic neural stimulus: a controlled clinical study.

Author: Davis, Paul B1; Wilde, Ron A; Steed, Lyndall G; Hanley, Peter J1 Division of Health Sciences, Curtin University of Technology, Perth, Australia. pauldavi@nova.edu

Publication info: Ear, nose, & throat journal 87.6 (Jun 2008): 330-339.

[ProQuest document link](#)

Abstract: In patients with tinnitus, achieving consistently positive treatment results is a challenge. We conducted a controlled clinical study of a new treatment approach (Neuromonics Tinnitus Treatment) that involves the use of a customized neural stimulus. This stimulus is delivered to the patient in the form of a pleasant acoustic sensation that is spectrally modified according to each patient's individual audiometric profile. This treatment approach is provided as part of a structured rehabilitation program. In our study, patients who received the customized stimulus (Neuromonics group) reported significantly greater and more consistent alleviation of tinnitus symptoms than did patients who participated in a counseling and support program with and without delivery of a broadband noise stimulus (Noise+Counseling group and Counseling-Only group, respectively). After 6 months of treatment, 86% of the Neuromonics patients met the minimum criterion for clinical success, defined as an alleviation of tinnitus disturbance of at least 40% (as determined by the Tinnitus Reaction Questionnaire score). By contrast, only 47 and 23% of the Noise+Counseling and Counseling-Only groups, respectively, reported a successful result according to this criterion. Mean improvements in tinnitus disturbance scores in the Neuromonics, Noise+Counseling, and Counseling-Only groups were 66, 22, and 15%, respectively. The differences between the Neuromonics group and the control groups were statistically significant. Significant differences were observed in other clinical outcomes. Patient reports of user acceptability were more consistently positive in the Neuromonics group.

MeSH: Severity of Illness Index, Probability, Analysis of Variance, Patient Satisfaction, Audiometry, Humans, Pain Measurement, Aged, Hearing Aids, Multivariate Analysis, Logistic Models, Risk Factors, Adult, Treatment Outcome, Acoustic Stimulation -- instrumentation, Acoustic Stimulation -- methods, Follow-Up Studies, Middle Aged, Adolescent, Female, Male, Tinnitus (major) -- diagnosis, Tinnitus (major) -- therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Davis, Paul B

Publication title: Ear, nose, & throat journal

Volume: 87

Issue: 6

Pages: 330-339

Number of pages: 10

Publication year: 2008

Year: 2008

ISSN: 0145-5613

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Peer reviewed: Yes

Format availability: Internet

Language of publication: English (eng)

Document type: Comparative Study, Controlled Clinical Trial, Journal Article, Research Support, Non-U.S. Gov't

Subfile: Index Medicus

Publication history :**Revised date:** 20 May 2009**Update:** 2010-04-13**Accession number:** pmid-18561116**ProQuest document ID:** 85308924**Document URL:** <http://search.proquest.com/docview/85308924?accountid=50982>**Last updated:** 2010-09-25**Database:** ComDisDome

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Auditory cortex stimulation for tinnitus suppression.**Author:** De Ridder, Dirk; Menovsky, Tomas; van de Heyning, Paul**Publication info:** Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology 29.4: 574-5; author reply 575. United States: United States. (Jun 2008)[ProQuest document link](#)**Abstract:** None available.**Subject:** *Auditory Cortex: physiology; Electrodes, Implanted; Humans; Prosthesis Implantation; *Tinnitus: therapy; *Transcranial Magnetic Stimulation**Record owner:** National Library of Medicine**Identifier / keyword:** National Library of Medicine**Supplemental data:** Comment On: Otol Neurotol. 2007 Dec; 28(8):1005-12[18043428]**Correspondence author:** De Ridder, Dirk**Publication title:** Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology**Volume:** 29**Issue:** 4**Pages:** 574-5; author reply 575**Publication year:** 2008**Year:** 2008**Location:** United States**ISSN:** 1531-7129**Source type:** Other Sources**Peer reviewed:** Yes**Format availability:** Print**Language of publication:** English (eng)**Document type:** Letter, Comment**Subfile:** Index Medicus**Update:** 2011-12-15**Accession number:** pmid-18418286

ProQuest document ID: 85413471

Document URL: <http://search.proquest.com/docview/85413471?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 82 of 100

Tinnitus and brain MRI findings in Japanese elderly.

Author: Sugiura, Saiko¹; Uchida, Yasue; Nakashima, Tsutomu; Yoshioka, Mayumi; Ando, Fujiko; Shimokata, Hiroshi¹ Department of Otorhinolaryngology, National Center for Geriatrics and Gerontology, Obu, Aichi, Japan. saiko@ncgg.go.jp

Publication info: Acta oto-laryngologica 128.5 (May 2008): 525-529.

[ProQuest document link](#)

Abstract: There is evidence of an inverse association between cerebral infarction and tinnitus in this study. The effects of cerebral infarction on tinnitus could be explained by a neurophysiological model of tinnitus. We examined the relationship between tinnitus and brain MRI findings including cerebral infarction, brain atrophy, ventricular dilatation, and white matter lesions. This was a cross-sectional population-based study of 2193 subjects aged 41-82 years living in Aichi prefecture, Japan. Detailed questionnaires, pure tone audiometry, and brain MRI were performed. After adjusting for potential confounders in a multiple logistic analysis, cerebral infarction was inversely associated with tinnitus (odds ratio (OR)=0.649, 95% confidence interval (CI)=0.477-0.884). Cerebral infarctions of the basal ganglia (OR=0.542), thalamus (OR=0.441), and pons (OR=0.319) were especially associated with tinnitus. Brain atrophy, ventricular dilatation, and white matter lesions had no significant effects on the prevalence of tinnitus.

Subject: Adult; Aged; Aged, 80 and over; Atrophy; Audiometry, Pure-Tone; Auditory Threshold: physiology; Basal Ganglia Cerebrovascular Disease; Brain: pathology; *Brain Diseases: diagnosis; Brain Stem Infarctions: diagnosis; Cerebral Infarction: diagnosis; Cerebral Ventricles: pathology; Cross-Sectional Studies; Demyelinating Diseases: diagnosis; Dilatation, Pathologic; Female; Humans; Japan; *Magnetic Resonance Imaging; Male; Middle Aged; Pons: pathology; Thalamic Diseases; *Tinnitus: etiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Sugiura, Saiko

Publication title: Acta oto-laryngologica

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Issue: 5

Pages: 525-529

Number of pages: 5

Publication year: 2008

Year: 2008

Location: Norway

ISSN: 0001-6489

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support

Subfile: Index Medicus

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Accession number: pmid-18421606

ProQuest document ID: 85412185

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Last updated: 2012-07-13

Database: ComDisDome

Document 83 of 100

Effectiveness of transmeatal low power laser irradiation for chronic tinnitus.

Author: Gungor, A1; Dogru, S; Cincik, H; Erkul, E; Poyrazoglu, E1 Department of Otolaryngology, Haydarpasa Military Hospital, Istanbul, Turkey.

Publication info: The Journal of laryngology and otology 122.5 (May 2008): 447-451.

[ProQuest document link](#)

Abstract: **OBJECTIVE:** To evaluate effectiveness of 5 mW laser irradiation in the treatment of chronic tinnitus. **STUDY DESIGN:** Prospective, randomised, double-blind study. **Methods:** This investigation included 66 ears in 45 patients with chronic unilateral or bilateral tinnitus. A 5 mW laser with a wavelength of 650 nm, or placebo laser, was applied transmeatally for 15 minutes, once daily for a week. A questionnaire was administered which asked patients to score their symptoms on a five-point scale, before and two weeks after laser irradiation. A decrease of one scale point, regarding the loudness, duration and degree of annoyance of tinnitus, was accepted to represent an improvement. **RESULTS:** The loudness, duration and degree of annoyance of tinnitus were improved, respectively, in up to 48.8, 57.7 and 55.5 per cent of the patients in the active laser group. No significant improvement was observed in the placebo laser group. **CONCLUSION:** Transmeatal, low power (5 mW) laser irradiation was found to be useful for the treatment of chronic tinnitus.

MeSH: Severity of Illness Index, Questionnaires, Double-Blind Method, Humans, Aged, Prospective Studies, Adult, Chronic Disease, Middle Aged, Statistics as Topic, Female, Male, Laser Therapy, Low-Level (major) -- methods, Laser Therapy, Low-Level (major) -- standards, Tinnitus (major) -- radiotherapy, Loudness Perception (major) -- physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Gungor, A

Publication title: The Journal of laryngology and otology

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Pages: 447-451

Number of pages: 5

Publication year: 2008

Year: 2008

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Document type: Journal Article, Randomized Controlled Trial

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ProQuest document ID: 742780262

Document URL: <http://search.proquest.com/docview/742780262?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

Document 84 of 100

Pros and cons of tinnitus retraining therapy.

Author: Hatanaka, Akio¹; Ariizumi, Yousuke; Kitamura, Ken¹ Department of Otolaryngology, Tokyo Medical and Dental University, Tokyo, Japan.

Publication info: Acta oto-laryngologica 128.4 (Apr 2008): 365-368.

[ProQuest document link](#)

Abstract: A significant reduction in the Tinnitus Handicap Inventory (THI) was obtained as early as 1 month after implementation of tinnitus retraining therapy (TRT). Over half of our patients either could not tolerate the tinnitus control instrument (TCI) or obtained a poor result in the TRT trial. Candidates for TRT should thus be restricted to patients who can use the TCI. TRT has been regarded as a promising therapy for tinnitus, although there have been very few studies to determine which patients are most likely to benefit from TRT. The aim of the present study was to demonstrate TRT's pros and cons based on our experience. The subjects were 217 patients with intractable tinnitus. Of those, 84 tolerated TRT and 79 were followed for 6 months. The remaining subjects did not undergo TRT. Japanese translations of the THI and visual analogue scale of annoyance caused by tinnitus (VAS) were administered to evaluate the effect of TRT. The average THI score at the beginning of the treatment was 48.8, but it was 36.3 ($p < 0.01$) 1 month after starting the treatment and 28.3 ($p < 0.005$) after 6 months.

Subject: *Acoustic Stimulation: methods; Audiometry, Pure-Tone; Counseling: methods; Disability Evaluation; Female; Follow-Up Studies; Hearing: physiology; Humans; Male; Middle Aged; Questionnaires; Retrospective Studies; Severity of Illness Index; Tinnitus: diagnosis; Tinnitus: physiopathology; *Tinnitus: rehabilitation; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Hatanaka, Akio

Publication title: Acta oto-laryngologica

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Number of pages: 4

Publication year: 2008

Year: 2008

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ISSN: 0001-6489

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Peer reviewed: Yes

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Document type: Comparative Study, Non-u.s. Gov't, Clinical Trial, Journal Article, Research Support

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ProQuest document ID: 85411222

Document URL: <http://search.proquest.com/docview/85411222?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 85 of 100

Functional imaging of unilateral tinnitus using fMRI.

Author: Lanting, C P1; De Kleine, E; Bartels, H; Van Dijk, P1 Department of Otorhinolaryngology/Head and Neck Surgery, University Medical Center Groningen, Groningen, The Netherlands.

c.p.lanting@med.umcg.nl

Publication info: Acta oto-laryngologica 128.4 (Apr 2008): 415-421.

[ProQuest document link](#)

Abstract: This article shows that the inferior colliculus plays a key role in unilateral subjective tinnitus. The major aim of this study was to determine tinnitus-related neural activity in the central auditory system of unilateral tinnitus subjects and compare this to control subjects without tinnitus. Functional MRI (fMRI) was performed in 10 patients (5 males) with unilateral tinnitus (5 left-sided, 5 right-sided) and 12 healthy subjects (6 males); both groups had normal hearing or mild hearing loss. fMRI experiments were performed using a 3T Philips Intera Scanner. Auditory stimuli were presented left or right and consisted of dynamically rippled broadband noise with a sound pressure level of 40 or 70 dB SPL. The responses of the inferior colliculus and the auditory cortex to the stimuli were measured. The response to sound in the inferior colliculus was elevated in tinnitus patients compared with controls without tinnitus.

Subject: Acoustic Stimulation: methods; Adult; Aged; Audiometry, Pure-Tone; Auditory Cortex: pathology; *Auditory Cortex: physiopathology; Female; Follow-Up Studies; *Hearing: physiology; Humans; Inferior Colliculi: pathology; *Inferior Colliculi: physiopathology; *Magnetic Resonance Imaging: methods; Male; Middle Aged; Prognosis; Regression Analysis; Severity of Illness Index; *Tinnitus: diagnosis; Tinnitus: physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Lanting, C P

Publication title: Acta oto-laryngologica

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Number of pages: 7

Publication year: 2008

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Location: Norway

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Language of publication: English (eng)

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Last updated: 2012-07-13

Database: ComDisDome

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Algorithm for evaluation of pulsatile tinnitus.

Author: Mattox, Douglas E1; Hudgins, Patricia1 Department of Otolaryngology - Head & Neck Surgery, Emory University School of Medicine, Atlanta, GA 30322, USA. douglas.mattox@emory.edu

Publication info: Acta oto-laryngologica 128.4 (Apr 2008): 427-431.

[ProQuest document link](#)

Abstract: Pulsatile tinnitus requires a careful physical examination and evaluation with selected imaging techniques to identify the origin of the symptoms. To evaluate the incidence of identifiable anomalies in patients with pulsatile tinnitus. This was a retrospective chart review undertaken in a tertiary care center. Patients seen in the outpatient otolaryngology clinic with the chief complaint of pulsatile tinnitus were evaluated by physical examination and imaging including CT angiography. The outcome measure was the incidence of identifiable abnormalities on imaging studies. Fifty-four patients were seen between January 2002 and June 2007 with the chief complaint of constant pulsatile tinnitus, excluding those with chemodectomas. On the basis of physical examination and imaging, 14 were considered arterial, 23 venous, and 15 were indeterminate in origin. Among patients with venous tinnitus, sigmoid sinus diverticulum was the most common finding. Among patients with arterial tinnitus, carotid atherosclerotic disease was the most common. One patient had erosion of the cochlea by the carotid artery. Non-vascular entities identified include superior semicircular canal dehiscence and benign intracranial hypertension.

Subject: Adolescent; Adult; Aged; *Algorithms; *Angiography: methods; *Audiometry: methods; Diagnosis, Differential; Female; Humans; *Magnetic Resonance Imaging: methods; Male; Middle Aged; Reproducibility of Results; Retrospective Studies; *Tinnitus: diagnosis; Tinnitus: physiopathology; Tomography, X-Ray Computed

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Mattox, Douglas E

Publication title: Acta oto-laryngologica

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Document type: Comparative Study, Journal Article

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Document URL: <http://search.proquest.com/docview/85410407?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 87 of 100

Tinnitus treatment with memantine.

Author: Figueiredo, Ricardo Rodrigues¹; Langguth, Berthold; Mello de Oliveira, Patricia; Aparecida de Azevedo, Andréia¹ OTOSUL-Otorrinolaringologia Sul-Fluminense. rfigueiredo@otosul.com.br

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 138.4 (Apr 2008): 492-496.

[ProQuest document link](#)

Abstract: To evaluate efficacy and safety of memantine in the treatment of tinnitus. Prospective, randomized, double-blind crossover study. A total of 60 patients with tinnitus were randomized into a double-blind, placebo-controlled, prospective crossover study. Patients each received up to 20 mg memantine and placebo for 90 days, separated by a 30-day washout period. Treatment effects were assessed by using the Tinnitus Handicap Inventory (THI). A total of 43 patients completed the trial. There was no significant improvement of THI score after memantine treatment compared with placebo. A possible tendency for delayed effects of memantine was observed. The incidence of side effects during memantine treatment was 9.4 percent, leading to interruption of treatment in all cases. This study does not provide evidence to recommend memantine for the treatment of tinnitus. A possible late effect of the drug should be evaluated in further studies with longer observation periods.

Subject: Adult; Aged; Cross-Over Studies; Double-Blind Method; Excitatory Amino Acid Antagonists: administration & dosage; Excitatory Amino Acid Antagonists: adverse effects; *Excitatory Amino Acid Antagonists: therapeutic use; Female; Humans; Male; Memantine: administration & dosage; Memantine: adverse effects; *Memantine: therapeutic use; Middle Aged; Placebo Effect; *Tinnitus: drug therapy; Treatment Failure

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Figueiredo, Ricardo Rodrigues

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

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Number of pages: 5

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Subfile: Index Medicus

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Accession number: pmid-18359360

ProQuest document ID: 85411986

Document URL: <http://search.proquest.com/docview/85411986?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 88 of 100

Combined temporal and prefrontal transcranial magnetic stimulation for tinnitus treatment: a pilot study.

Author: Kleinjung, Tobias¹; Eichhammer, Peter; Landgrebe, Michael; Sand, Philipp; Hajak, Goeran; Steffens, Thomas; Strutz, Juergen; Langguth, Berthold¹ Department of Otorhinolaryngology, University of Regensburg, Regensburg, Germany. tobias.kleinjung@klinik.uni-regensburg.de

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 138.4 (Apr 2008): 497-501.

[ProQuest document link](#)

Abstract: Low-frequency repetitive transcranial magnetic stimulation (rTMS) of the temporal cortex has been proposed as a new treatment strategy for patients with chronic tinnitus. However, functional abnormalities in tinnitus patients also involve brain structures used for attentional and emotional processing, such as the dorsolateral prefrontal cortex. Therefore, we have developed a new rTMS treatment strategy for tinnitus patients that consists of a combination of high-frequency prefrontal and low-frequency temporal rTMS. A total of 32 patients received either low-frequency temporal rTMS or a combination of high-frequency prefrontal and low-frequency temporal rTMS. Treatment effects were assessed with a standardized tinnitus questionnaire (TQ). Directly after therapy there was an improvement of the TQ-score for both groups, but no differences between groups. An evaluation after 3 months

revealed a remarkable benefit from the use of combined prefrontal and temporal rTMS treatment. These results support recent data that suggest that auditory and nonauditory brain areas are involved in tinnitus pathophysiology.

Subject: Adult; Chronic Disease; Female; Humans; Male; Middle Aged; Pilot Projects; Prefrontal Cortex: physiopathology; Temporal Lobe: physiopathology; Tinnitus: physiopathology; *Tinnitus: therapy; *Transcranial Magnetic Stimulation: methods; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kleinjung, Tobias

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Number of pages: 5

Publication year: 2008

Year: 2008

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Accession number: pmid-18359361

ProQuest document ID: 85419358

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Last updated: 2012-07-13

Database: ComDisDome

Document 89 of 100

Transient and distortion product evoked oto-acoustic emissions in normal hearing patients with and without tinnitus.

Author: Granjeiro, Ronaldo C1; Kehrle, Helga M; Bezerra, Roberta L; Almeida, Vanessa F; Sampaio, André L L; Oliveira, Carlos A1 Secretaria de Saúde do Governo do Distrito Federal, Brasília, Brasil. ronaldogranjeiro@terra.com.br

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 138.4 (Apr 2008): 502-506.

[ProQuest document link](#)

Abstract: To test the hypothesis that tinnitus begins with outer hair cell dysfunction by recording transient

(TEOAE) and distortion product evoked (DPOAE) oto-acoustic emissions in patients with normal hearing with (study group, SG) and without tinnitus (control group, CG). Case control study. SG had 32 patients with pure tone thresholds below 25 dB in the 500 to 8000 Hz interval. CG had 37 age- and gender-matched patients with similar thresholds. All patients had normal tympanograms and stapedial reflexes. TEOAE were recorded with wide band click in continuous mode at 80-dB peak SPL. DPOAE were recorded with $f1/f2 = 1.22$ and intensities of 65 dB (f1) and 55 dB (f2) SPL. DPOAE were abnormal in 68.4% of SG and in 50% of CG ($P = 0.036$). TEOAE were abnormal in 70.2% of SG and in 16.10% of CG ($P = 0.0001$). SG had significantly higher prevalence of abnormal TEOAE and DPOAE than CG.

Subject: Adult; Case-Control Studies; Female; Hair Cells, Auditory, Outer: physiology; Humans; Male; Middle Aged; *Otoacoustic Emissions, Spontaneous: physiology; *Tinnitus: physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Granjeiro, Ronaldo C

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

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Database: ComDisDome

Document 90 of 100

Development and psychometric adequacy of the screening version of the tinnitus handicap inventory.

Author: Newman, Craig W1; Sandridge, Sharon A; Bolek, Lauren1 Section of Audiology, Head and Neck Institute, Cleveland Clinic, Cleveland, Ohio, USA. newmanc@ccf.org

Publication info: Otolology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology 29.3 (Apr 2008): 276-281.

[ProQuest document link](#)

Abstract: To develop a screening version of the Tinnitus Handicap Inventory (THI-S) and establish its psychometric characteristics.: Prospective clinical study to analyze 1) the level of predictability between THI and THI-S; 2) test-retest reliability of the THI-S; 3) 95% confidence intervals (critical difference scores) for the THI-S; and 4) a THI-S cutoff score used for referral purposes. Head and Neck Institute at the Cleveland Clinic, a tertiary care medical center.: Thirty-three patients reporting tinnitus as their primary complaint. There was, on average, a 16-day interval between test-retest administrations of the THI-S. Comparability of scores between the THI and the THI-S and test-retest reliability of the THI-S was assessed using Pearson product-moment correlations. The level of agreement between the 2 administrations of the THI-S was evaluated using Bland-Altman repeatability plots. Comparability between the THI and THI-S was high ($r = 0.90$). Test-retest reliability of the THI-S was adequate ($r = 0.81$), as well as the level of agreement between administrations as demonstrated by the Bland-Altman plot. Based on 95% confidence intervals, pretreatment and posttreatment scores would have to differ by more than 10 points for intervention efforts to be considered significant. A 6-point cutoff score was analyzed as an appropriate fence for referral. The THI-S is a psychometrically robust screening measure of activity limitation and participation restriction.

Subject: Adult; Aged; *Disability Evaluation; Female; Humans; Male; Mass Screening: standards; Middle Aged; Prospective Studies; *Psychometrics: standards; *Questionnaires: standards; Reproducibility of Results; *Tinnitus: physiopathology; *Tinnitus: rehabilitation

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Newman, Craig W

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

Volume: 29

Issue: 3

Pages: 276-281

Number of pages: 6

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Year: 2008

Location: United States

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Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Journal Article, Validation Studies

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18277308

ProQuest document ID: 85411875

Document URL: <http://search.proquest.com/docview/85411875?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 91 of 100

Pulsatile tinnitus.

Author: Arganbright, Jill1; Friedland, David R1 Department of Otolaryngology and Communication Sciences, Medical College of Wisconsin, Milwaukee, Wisconsin 53226, USA.

Publication info: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology 29.3 (Apr 2008): 416.

[ProQuest document link](#)

Abstract: None available.

Subject: Humans; *Imaging, Three-Dimensional; *Tinnitus: radiography; *Tomography, X-Ray Computed

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Arganbright, Jill

Publication title: Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology

Volume: 29

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Pages: 416

Number of pages: 1

Publication year: 2008

Year: 2008

Location: United States

ISSN: 1531-7129

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Format availability: Print

Language of publication: English (eng)

Document type: Case Reports, Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-17728689

ProQuest document ID: 85412047

Document URL: <http://search.proquest.com/docview/85412047?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 92 of 100

Relation of distortion product otoacoustic emission with tinnitus.

Author: Ami, Mazita1; Abdullah, Asma; Awang, Mahamad A; Liyab, Borhan; Saim, Lokman1 Department of Otorhinolaryngology-Head and Neck Surgery, Faculty of Medicine. Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia. mazitaami@yahoo.com

Publication info: The Laryngoscope 118.4 (Apr 2008): 712-717.

[ProQuest document link](#)

Abstract: To investigate cochlear outer hair cell function based on distortion product otoacoustic emission (DPOAE) in patients with tinnitus. This is a case control study. The subjects are patients who attended the Otorhinolaryngology Clinic in Hospital Universiti Kebangsaan Malaysia over a period of 19 months from April 2005 until October 2006. All patients underwent a full ENT assessment and had tympanometry, pure tone audiometry, and DPOAE tests. The UKM Research and Ethics Committee reviewed and approved the study proposal prior to commencement of this study. The study population included 49 patients. They consisted of 16 patients (32 ears) with tinnitus and reduced hearing, 13 patients (26 ears) with tinnitus and normal hearing, 7 patients (13 ears) without tinnitus with reduced hearing, and 13 patients (26 ears) without tinnitus with normal hearing. Statistical analysis showed significant differences ($P = .00$) of mean DPOAE levels between the four groups of patients. Our results suggest that reduced outer hair cell activity, as detected by reduced DPOAE levels, may manifest as tinnitus even before there is a shift on hearing threshold. We also postulate that further reduction of cochlear outer hair cell activity, as shown by further reduced DPOAE levels, may actually terminate the source of tinnitus.

Subject: Acoustic Impedance Tests; Adult; Aged; Audiometry, Pure-Tone; *Auditory Perception: physiology; *Auditory Threshold: physiology; Bone Conduction: physiology; Case-Control Studies; Chronic Disease; *Cochlea: physiopathology; Evoked Potentials, Auditory: physiology; Female; *Hair Cells, Auditory, Outer: physiology; Hearing: physiology; Hearing Loss: physiopathology; Humans; Male; Middle Aged; *Tinnitus: physiopathology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ami, Mazita

Publication title: The Laryngoscope

Volume: 118

Issue: 4

Pages: 712-717

Number of pages: 6

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0023-852X

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18176342

ProQuest document ID: 85410935

Document URL: <http://search.proquest.com/docview/85410935?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 93 of 100

Otoacoustic emissions, ear fullness and tinnitus in the recovery course of sudden deafness.

Author: Ishida, Ieda M1; Sugiura, Makoto; Teranishi, Masaaki; Katayama, Naomi; Nakashima, Tsutomu1 Nagoya University Graduate School of Medicine, Department of Otorhinolaryngology, 65, Tsurumai-cho, Showa-ku, Nagoya 466-8550, Japan. iishida@med.nagoya-u.ac.jp

Publication info: Auris, nasus, larynx 35.1 (Mar 2008): 41-46.

[ProQuest document link](#)

Abstract: This study aimed to investigate how the symptoms of ear fullness, tinnitus and otoacoustic emissions (OAE) change in relation to the recovery course of pure tone audiometry thresholds (PTA) in sudden deafness (SD). This study analyzed follow-up data on ear fullness, tinnitus and otoacoustic emissions of eight SD patients with good hearing improvement (Group A) and eight SD patients with poor hearing improvement (Group B) in an attempt to elucidate the behavior of these symptoms in their recovery course. This study was done until there was no change in the PTA for more than 1 week and hearing recovery was no longer expected. All patients from both groups had ear fullness and tinnitus in association with the onset of SD. However, these symptoms improved only in Group A, showing a significant relationship between PTA recovery and the improvement of ear fullness annoyance ($P < 0.05$), presence of tinnitus ($P < 0.01$), improvement in tinnitus loudness ($P < 0.01$) and in tinnitus annoyance ($P < 0.01$). No patients (Group A or B) had OAE responses at their first examination. In Group A, OAE responses appeared simultaneously with improvement of hearing levels in five patients (63%) and it appeared later than hearing levels improvement in the other three patients (37%) from Group A. No patient from Group B showed OAE response on follow-up. SD patients with good hearing improvement (Group A) tended to have OAE responses and the sensations of the ear fullness and tinnitus improved almost simultaneously with hearing level improvement. Their PTA improvement occurred primarily in the low to mid frequencies, with high frequencies showing less recovery. When hearing recovery was not full, OAEs did not reappear for these frequencies. Patients with poor hearing improvement tended to have absent OAEs and persistent ear fullness and tinnitus.

Subject: Adenosine Triphosphate: therapeutic use; Adolescent; Adult; *Audiometry, Pure-Tone; *Auditory Threshold: physiology; Ear Diseases: drug therapy; *Ear Diseases: physiopathology; Female; Hearing Loss, Sudden: drug therapy; *Hearing Loss, Sudden: physiopathology; Humans; Male; Middle Aged; *Otoacoustic Emissions, Spontaneous: physiology; Prognosis; Sensation Disorders: drug therapy; *Sensation Disorders: physiopathology; *Tinnitus: physiopathology; Treatment Outcome; Vitamin B Complex: therapeutic use

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Ishida, Ieda M

Publication title: Auris, nasus, larynx

Volume: 35

Issue: 1

Pages: 41-46

Number of pages: 6

Publication year: 2008

Year: 2008

Location: Netherlands

ISSN: 0385-8146

Source type: Scholarly Journals

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-17904320

ProQuest document ID: 85407349

Document URL: <http://search.proquest.com/docview/85407349?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 94 of 100

Repetitive transcranial magnetic stimulation in veterans with debilitating tinnitus: a pilot study.

Author: Lee, Scott L1; Abraham, Megan; Cacace, Anthony T; Silver, Steven M1 Division of Otolaryngology Head and Neck Surgery, Albany Medical College, Albany, NY 12208, USA.
leesl@mail.amc.edu

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 138.3 (Mar 2008): 398-399.

[ProQuest document link](#)

Abstract: Available evidence suggests tinnitus arises from excessive spontaneous activity in the left superior temporal gyrus, and repetitive transcranial magnetic stimulation (rTMS) may suppress this activity. Our hypothesis is that rTMS applied to this region would decrease tinnitus complaints in veterans. Prospective, nonrandomized trial. Eight patients with tinnitus received 5 consecutive days of rTMS (0.5 Hz, 20 minutes) to the left temporoparietal area. Tinnitus Handicap Inventory (THI) measures before sessions 1 and 3 and after session 5 were used to evaluate efficacy. Patient 1's THI decreased 40 to 34 to 26, patient 4 reported a subjective improvement, patient 8 withdrew, and the remaining patients reported no improvement. Adverse effects included temporary soreness, restlessness, and photophobia. The parameters for this rTMS study are different from those that reported success with its use. With these current parameters, rTMS did not improve tinnitus in veterans. There were no permanent adverse outcomes.

Subject: Aged; Aged, 80 and over; Humans; Male; Middle Aged; Pilot Projects; Prospective Studies; *Tinnitus: therapy; *Transcranial Magnetic Stimulation; Veterans

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Lee, Scott L

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 138

Issue: 3

Pages: 398-399

Number of pages: 2

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0194-5998

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Format availability: Print

Language of publication: English (eng)

Document type: Clinical Trial, Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18312892

ProQuest document ID: 85397678

Document URL: <http://search.proquest.com/docview/85397678?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 95 of 100

Direct electrical stimulation of Heschl's gyrus for tinnitus treatment.

Author: Seidman, Michael D1; Ridder, Dirk De; Elisevich, Kost; Bowyer, Susan M; Darrat, Ilaaf; Dria, Jason; Stach, Brad; Jiang, Quan; Tepley, Norman; Ewing, James; Seidman, Marlee; Zhang, Jinsheng1
Department of Otolaryngology-Head and Neck Surgery, Henry Ford Health System, Detroit, MI 48323, USA. mseidma1@hfhs.org

Publication info: The Laryngoscope 118.3 (Mar 2008): 491-500.

[ProQuest document link](#)

Abstract: The purpose of the study was to determine the effect of electrical stimulation of the auditory cortex in patients with tinnitus. Nonrandomized clinical trial. Two patients with debilitating tinnitus refractory to conventional therapies were treated. Patients were evaluated with validated questionnaires and psychoacoustic measures to determine the frequency and pitch of their tinnitus. Tones at these frequencies were then presented to the first patient (RP) under magnetoencephalography (MEG) and functional magnetic resonance imaging (fMRI) to determine the tonotopic map for these frequencies in Heschl's gyrus. These tonotopic sites were targeted for implant with a quadripolar electrode. In the second patient (MV), only the fMRI tonotopic map was performed. These fMRI results detected an area of increased activity, which was selected as the site for the implanted bipolar electrode. Patient RP (bilateral tinnitus for 2 years) has experienced a sustained reduction to near elimination of tinnitus with intracerebral implanted electrodes, whereas patient MV (unilateral tinnitus for 7 years) had an unsustained reduction in her tinnitus. These findings suggest that the perception and annoyance of tinnitus may be modulated or reduced through electrical stimulation of the auditory cortex. These unsustained effects for patient MV may have been influenced by the longstanding nature of her tinnitus or by another reason as yet undetermined.

Subject: Adult; *Auditory Cortex; *Electric Stimulation Therapy: methods; Female; Humans; Magnetic Resonance Imaging; Male; Middle Aged; *Prostheses and Implants; Tinnitus: diagnosis; *Tinnitus: therapy

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Seidman, Michael D

Publication title: The Laryngoscope

Grant: Agency: NINDS NIH HHS Acronym: NS Country: United States Grant/Contract ID: R01-NS3030914

Volume: 118

Issue: 3

Pages: 491-500

Number of pages: 10

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0023-852X

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, N.i.h., Extramural, Case Reports, Journal Article, Research Support

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18094653

ProQuest document ID: 85400532

Document URL: <http://search.proquest.com/docview/85400532?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 96 of 100

The effect of unilateral multichannel cochlear implant on bilaterally perceived tinnitus.

Author: Quaranta, Nicola¹; Fernandez-Vega, Susana; D'elia, Chiara; Filipo, Roberto; Quaranta, Antonio¹
Department of Ophthalmology and Otolaryngology, University of Bari, Bari, Italy.
nicola.quaranta@orl.uniba.it

Publication info: Acta oto-laryngologica 128.2 (Feb 2008): 159-163.

[ProQuest document link](#)

Abstract: Available multichannel cochlear implants (CIs) provide effective tinnitus suppression. More sophisticated speech strategies are more effective than analogue or slow strategies. The mechanisms by which tinnitus is suppressed by CIs are unclear; however, both acoustic masking and reorganization of the right auditory association cortex induced by the CI are possible mechanisms. CI significantly reduced the tinnitus-related Handicap as assessed by the Tinnitus handicap Inventory (THI). The objective of the study was to evaluate the effects of a unilateral CI on bilaterally perceived tinnitus. Forty-one profoundly deaf patients implanted with a multichannel CI reporting bilateral tinnitus were evaluated. All patients were asked to complete a questionnaire that evaluated the presence, location and intensity of tinnitus before and after cochlear implantation. Seven patients (17%) reported the perception of a 'new tinnitus' after surgery. With the CI off tinnitus was abolished in 23 patients (56.1%) in the implanted ear and in 22 patients (53.6%) in the contralateral ear. With the CI on tinnitus was abolished in the ipsilateral ear in 27 patients (65.8%) and in the contralateral ear in 27 patients (65.8%). Statistical analysis showed a significant reduction of the total THI score and of each subscale score ($p < 0.001$).

Subject: Adolescent; Adult; Aged; Auditory Cortex: physiopathology; *Cochlear Implants; Comorbidity; Deafness: diagnosis; Deafness: etiology; Deafness: physiopathology; *Deafness: rehabilitation; Disability Evaluation; Female; Functional Laterality: physiology; Humans; Male; Middle Aged; Patient Satisfaction;

Prosthesis Design; Tinnitus: diagnosis; Tinnitus: etiology; Tinnitus: physiopathology; *Tinnitus: rehabilitation; Treatment Outcome

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Quaranta, Nicola

Publication title: Acta oto-laryngologica

Volume: 128

Issue: 2

Pages: 159-163

Number of pages: 5

Publication year: 2008

Year: 2008

Location: Norway

ISSN: 0001-6489

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Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-17851950

ProQuest document ID: 85410335

Document URL: <http://search.proquest.com/docview/85410335?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 97 of 100

Imaging of tinnitus.

Author: Kang, Melissa¹; Escott, Edward¹ University of Pittsburgh Medical Center, 200 Lothrop Street, Pittsburgh, PA 15213, USA. melissakang@yahoo.com

Publication info: Otolaryngologic clinics of North America 41.1 (Feb 2008): 179-93, vii.

[ProQuest document link](#)

Abstract: From a radiologic workup perspective, tinnitus is classified into pulsatile, which can be objective, and nonpulsatile, which is typically subjective. There is considerable discrepancy within the literature regarding the percentage of positive findings in patients with pulsatile tinnitus. The authors discuss the overlap in the radiographic findings detected in association with tinnitus in both asymptomatic patients and symptomatic patients and the importance for imaging to detect treatable causes. They discuss imaging related to diagnosis and treatment and provide an imaging workup algorithm.

Subject: Algorithms; Bone Diseases: complications; Bone Diseases: diagnosis; Brain Neoplasms: complications; Brain Neoplasms: diagnosis; Contrast Media; *Diagnostic Imaging; Humans; Image Enhancement; Magnetic Resonance Angiography; Magnetic Resonance Imaging; Petrous Bone:

pathology; Radiographic Image Enhancement; Temporal Bone: radiography; Tinnitus: classification;
*Tinnitus: diagnosis; Tinnitus: etiology; Tomography, X-Ray Computed: methods; Vascular Malformations:
complications; Vascular Malformations: diagnosis

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Kang, Melissa

Publication title: Otolaryngologic clinics of North America

Volume: 41

Issue: 1

Pages: 179-93, vii

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0030-6665

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Journal Article

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18261531

ProQuest document ID: 85410632

Document URL: <http://search.proquest.com/docview/85410632?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 98 of 100

Carbamazepine reduces the behavioural manifestations of tinnitus following salicylate treatment in rats.

Author: Zheng, Yiwen¹; Hooton, Katie; Smith, Paul F; Darlington, Cynthia L¹ Department of Pharmacology and Toxicology, School of Medical Sciences, University of Otago, Dunedin, New Zealand.

Publication info: Acta oto-laryngologica 128.1 (Jan 2008): 48-52.

[ProQuest document link](#)

Abstract: The results are consistent with the hypothesis that carbamazepine (CBZ) has efficacy against tinnitus in humans. CBZ is an anti-epileptic drug that is widely used for the treatment of tinnitus. Despite this, there are relatively few clinical trials or preclinical studies supporting its efficacy. In an effort to increase the amount of information available on CBZ, the aim of this study was to investigate the efficacy of CBZ in salicylate-induced tinnitus in rats. We investigated the effects of CBZ in an animal model of tinnitus induced by the injection of salicylate using a conditioned lick suppression paradigm. We found that CBZ, at a dose of 15 mg/kg i.p., but not at 5 mg/kg or 30 mg/kg, significantly suppressed the behavioural manifestations of tinnitus.

Subject: Acoustic Stimulation; Animals; *Anti-Inflammatory Agents, Non-Steroidal: toxicity; *Anticonvulsants: pharmacology; Association Learning: drug effects; *Carbamazepine: pharmacology; *Conditioning, Classical: drug effects; Dose-Response Relationship, Drug; *Drinking Behavior: drug effects; Electroshock; *Fear: drug effects; Injections, Intraperitoneal; Male; Rats; Rats, Wistar; *Sodium Salicylate: toxicity; *Tinnitus: chemically induced

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Zheng, Yiwen

Publication title: Acta oto-laryngologica

Volume: 128

Issue: 1

Pages: 48-52

Number of pages: 5

Publication year: 2008

Year: 2008

Location: Norway

ISSN: 0001-6489

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Non-u.s. Gov't, Journal Article, Research Support

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-17851905

ProQuest document ID: 85415806

Document URL: <http://search.proquest.com/docview/85415806?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 99 of 100

Influence of silence and attention on tinnitus perception.

Author: Knobel, Keila Alessandra Baraldi¹; Sanchez, Tanit Ganz¹ ENT Department, University of São Paulo Medical School, São Paulo, Brazil. keila@gabengenharia.com.br

Publication info: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery 138.1 (Jan 2008): 18-22.

[ProQuest document link](#)

Abstract: The purpose of this study was to study the effect of attention and sustained silence on the emergence of auditory phantom perception in normal-hearing adults. Cross-sectional survey. While sitting in a sound booth, 66 volunteers (age range, 18-65; mean age, 37.3) performed 3 experiments of 5 minutes each, consecutively and randomly presented. Two deviated attention from auditory system (Hanoi and visual attention experiments), and 1 drove attention to the auditory system (auditory attention). After each

experiment, participants were asked about their auditory and visual perception. No sound or light change was given at any moment. Of the participants, 19.7% experienced tinnitus during Hanoi, 45.5% during visual attention, and 68.2% during auditory attention experiment, with no significant differences for studied variables. Tinnitus-like perceptions may occur in a nonclinical population in a silent environment. Concomitant auditory attention plays an important role on the emergence of tinnitus.

Subject: Acoustic Stimulation; Adolescent; Adult; Aged; *Attention: physiology; *Auditory Perception: physiology; Brazil: epidemiology; Cross-Sectional Studies; Female; Humans; Male; Middle Aged; Prevalence; Tinnitus: epidemiology; *Tinnitus: physiopathology; Visual Perception: physiology

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Knobel, Keila Alessandra Baraldi

Publication title: Otolaryngology--head and neck surgery : official journal of American Academy of Otolaryngology-Head and Neck Surgery

Volume: 138

Issue: 1

Pages: 18-22

Number of pages: 5

Publication year: 2008

Year: 2008

Location: United States

ISSN: 0194-5998

Source type: Scholarly Journals

Peer reviewed: Yes

Format availability: Print

Language of publication: English (eng)

Document type: Comparative Study, Non-u.s. Gov't, Randomized Controlled Trial, Journal Article, Research Support

Subfile: Index Medicus

Update: 2011-12-15

Accession number: pmid-18164988

ProQuest document ID: 85404781

Document URL: <http://search.proquest.com/docview/85404781?accountid=50982>

Last updated: 2012-07-13

Database: ComDisDome

Document 100 of 100

Tinnitus rehabilitation: a mindfulness meditation cognitive behavioural therapy approach.

Author: Sadlier, M1; Stephens, S D G; Kennedy, V1 Physiotherapy Department, University Hospital of Wales, Cardiff, UK. sadliermj@cardiff.ac.uk

Publication info: The Journal of laryngology and otology 122.1 (Jan 2008): 31-37.

[ProQuest document link](#)

Abstract: BACKGROUND: Chronic tinnitus is a frequent symptom presentation in clinical practice. No

drug treatment to date has shown itself to be effective. The aim of the present study was to investigate the effects of cognitive behavioural therapy and meditation in tinnitus sufferers. **METHODOLOGY:** Patients were selected from a dedicated tinnitus clinic in the Welsh Hearing Institute. A waiting list control design was used. Twenty-five chronic tinnitus sufferers were consecutively allocated to two groups, one receiving a cognitive behavioural therapy/meditation intervention of four one hour sessions with the other group waiting three months and subsequently treated in the same way, thereby acting as their own control. The main outcome was measured using the Hallam tinnitus questionnaire. A four to six month follow up was conducted. **RESULTS:** These showed significant statistical reductions in tinnitus variables both in the active and also in the control group. Post-therapy, no significant change was found after the waiting list period. The improvement was maintained at the four to six month period. **CONCLUSION:** The positive findings give support for the use of cognitive behavioural therapy/meditation for chronic tinnitus sufferers.

MeSH: Severity of Illness Index, Humans, Aged, Quality of Life, Tinnitus -- etiology, Tinnitus -- psychology, Tinnitus -- rehabilitation, Life Change Events, Adult, Treatment Outcome, Chronic Disease, Follow-Up Studies, Middle Aged, Female, Male, Cognitive Therapy (major) -- methods, Meditation (major) -- methods

Record owner: National Library of Medicine

Identifier / keyword: National Library of Medicine

Correspondence author: Sadlier, M

Publication title: The Journal of laryngology and otology

Volume: 122

Issue: 1

Pages: 31-37

Number of pages: 7

Publication year: 2008

Year: 2008

ISSN: 0022-2151

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Format availability: Internet

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Document type: Controlled Clinical Trial, Journal Article

Update: 2010-04-13

Accession number: pmid-17451612

ProQuest document ID: 742780191

Document URL: <http://search.proquest.com/docview/742780191?accountid=50982>

Last updated: 2010-09-25

Database: ComDisDome

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