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A WORLD LEADER
IN SUPPORT AND ADVICE

Tinnitus and sleep disturbance

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This information has been written to help you understand more about sleep and how it can sometimes go wrong.

Introduction

Sleep disturbance affects most of us at some stage of our lives. It is common not only in adults but also in children. It is particularly prevalent amongst older adults.

Some people with tinnitus may find they have greater difficulty getting off to sleep. It may be that the shift from a relatively noisy daytime environment to the quietness of the bedroom makes the tinnitus noises more noticeable.

Insomnia refers to difficulty in falling and/or staying asleep. Mild sleep disturbances are very common, but to be classified as insomnia, the delay in going to sleep or going back to sleep needs to be considerable, occurring at least three or four times a week and persisting for six months or more.

The sleep cycle and tinnitus

Sleep is a 24-hour cycle, so activities that we carry out in the day will affect that night's sleep. A normal night's sleep has several stages, from light to deep sleep, and includes several awakenings; the first awakening usually occurs after just a couple of hours sleep. As you grow older you experience less very deep sleep and more awakenings. Sleep becomes lighter and more fragmented and there is a tendency to nap during the day. When you add up all the sleep you get then most people get about seven or eight hours sleep, but normal sleep times vary enormously.

Natural awakenings are usually forgotten by the morning, but if you are worrying about your tinnitus during them, they will last much longer and will be remembered. It seems most likely that tinnitus does not actually wake people, but of course, it can be the first thing you notice when a natural awakening occurs.

Many people with tinnitus do in fact sleep well and see sleep as a refreshing escape from tinnitus. Those who sleep well do not seem to have different

tinnitus from those who have trouble sleeping. But those who sleep badly **worry** more at night than people with tinnitus who do sleep well. The beliefs and worries that you have about the quantity of sleep, or about the effects of not sleeping, or about tinnitus generally, have more of an impact on sleep problems than the sound of tinnitus.

Why do we need sleep?

Surprisingly, the exact reason for sleep is unclear. Possibly it conserves or restores energy, but the evidence for this is not completely clear. People do tend to feel bad if they have not slept well, but the physical impact of sleep loss is not as clear cut as you might think and long term or 'chronic' sleep loss should be distinguished from short term loss.

People who have been deliberately deprived of sleep in the laboratory tend to do less well on some psychological tests. In this context people often perform logical, deductive tests (like IQ tests) well but perform more poorly on tests of 'executive' functioning that require more creative thinking.

These effects are seen after prolonged periods without any sleep and they are reversed by relatively short amounts of sleep. The effects of 'jet lag' are also well known to many; however, it is not clear whether this is a result of sleep loss, or more to do with disruption of your body clock.

The situation is different, however, amongst those who have chronic poor sleep. Poor sleep is not the same as no sleep and it is clear that many people perform very well on little sleep, in spite of feeling bad. Clearly, you need to act sensibly and be aware of your limitations, but for many people a loss of sleep may not have the devastating consequences that most of us fear. Worrying about sleep loss is one of the things most likely to keep it going and one of the things most likely to create stress that can impact on your wellbeing. The stress associated with it may also be a major reason why sleep loss can make you feel so bad.

A vicious cycle

Insomnia amongst people with tinnitus is a complex state that is usually accompanied by anxiety. In the quiet environment that usually accompanies bedtime, you may become more aware of your tinnitus and this can lead to unhelpful worrying thoughts such as, "I'll never be able to sleep!" This creates a level of **stress arousal** (anxiety) and this stress arousal leads to the insomnia. In turn, poor sleep can increase your anxiety which keeps you trapped in the vicious cycle of sleeplessness, worry and awareness of tinnitus.

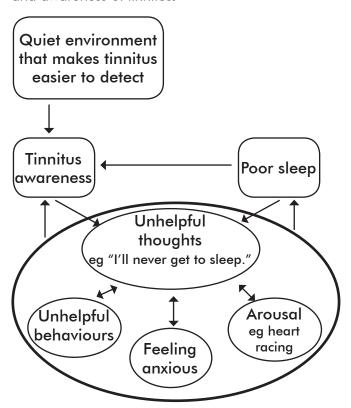


Diagram: the vicious cycle of insomnia and the role of tinnitus

Do's and don'ts

Sleep is very much a matter of habit or routine. More often than not, poor sleep results from poor routines, and often people's attempts to solve their sleep problems actually make them worse.

Do talk to your doctor if you suffer from insomnia. Sleep loss may be related to some other

medical condition which may be treatable.

Don't reject an offer of sleep medication out of hand. Many GPs offer medication to help people sleep. Such medications have had a bad press in recent years, but although medication is not a long term solution to insomnia, with medical guidance in the selection of the right medicine and its proper use, a short term crisis can be greatly relieved.

Don't use alcohol or 'over the counter' medicines to induce sleep. They may send you to sleep but will also disrupt the normal sleep pattern. You may wake sooner and have greater trouble getting back to sleep.

Do limit the amount of caffeine (tea, coffee, cola, energy drinks) and nicotine you take. These are stimulants and may help keep you awake. It may not be necessary to give them up completely, but rather cut down or cut them out in the evening.

Do keep active during the day. Fit people sleep better than those who are unfit. However, don't exercise near bedtime. Exercise late at night may tire you out but it may also disrupt the normal sleep cycle.

Do try to unwind for at least an hour before bedtime. A busy mind makes it more difficult to sleep.

Do write down any worries that you may have. Spend a set amount of time (say 15-20 minutes) doing this each evening. If you are able to, consider how you might resolve them. Even if you can't resolve your worries, then writing them down can reduce anxiety.

Do practice relaxation exercises during the day and find some short form of relaxation to try at night. Our leaflet *Relaxation* gives some ideas you can try.

Do go to bed when you feel sleepy - not just because it's a certain time on the clock.

Don't use the bedroom for things apart from sleep (and relaxation.) Don't watch television, complete crosswords or write work reports (for example) in bed. These things may distract you, but they will also stimulate your mind and a busy mind will keep you awake.

Do turn the light off straight away when you get into bed. Tell yourself that sleep will come when it's ready. Don't 'try hard' to go to sleep - resting in bed can be just as helpful.

Do get up and go to another room if you are not asleep in 25 to 30 minutes. Do something relaxing like reading and go back to bed when you feel sleepy again. Repeat the process if you are not asleep in another 30 minutes.

Do get up at the same time each day - even at weekends. Try not to sleep in the day. This will help you to keep your body clock in a helpful cycle.

Don't take it easy after a bad night's sleep. This might make the day more boring and increase the sense of tiredness. Most people can still do quite a lot after a bad night, and if you do, you may feel better for it - but use common sense.

Further reading

Overcoming insomnia and sleep problems: a self-help guide using cognitive behavioural techniques by Colin A Espie (Robinson Publishing ISBN-10 184529074)

Sleepfaring: a journey through the science of sleep by Jim Horne (OUP Oxford ISBN-10 019922837X)

Living with tinnitus and hyperacusis by Laurence McKenna, David Baguley and Don McFerran (Sheldon Press ISBN 978-1-84709-083-6)

Living with tinnitus and hyperacusis may be ordered directly from the BTA. It costs £6.00 including postage and packing for BTA members (£8.00 for non members).

References

The list of references consulted in the production of this leaflet is available on request.

Alternative formats

This publication is available in large print on request.

For further information

Our helpline staff can answer your questions on this and other tinnitus related topics on 0800 018 0527.

BTA publications

Our information leaflets are written by leading tinnitus professionals and provide accurate, reliable and authoritative information which is updated regularly. Please contact us if you would like to receive a copy of any of our information leaflets listed below, or they can be downloaded from our website.

- All about tinnitus
- Balance and tinnitus
- Complementary therapy for tinnitus: an opinion
- Drugs and tinnitus
- Ear wax removal and tinnitus
- Flying and the ear

- Food, drink and tinnitus
- Hearing aids and tinnitus
- Hyperacusis
- Information for musicians
- Musical hallucination (musical tinnitus)
- Noise and the ear
- Otosclerosis
- Pulsatile tinnitus
- Relaxation
- Self help for tinnitus
- Sound therapy
- Sources of mutual support for tinnitus
- Supporting someone with tinnitus
- Taming tinnitus
- Tinnitus and disorders of the temporomandibular joint (TMJ) and neck
- Tinnitus and sleep disturbance
- Tinnitus and stress
- Tinnitus services

Leaflets for children:

- Ellie, Leila and Jack have tinnitus (for under 8s)
- Tinnitus (for 8-11 year olds)
- Tinnitus (for 11-16 year olds)

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