



Tinnitus

The Department of Ear, Nose & Throat (ENT) - Head & Neck Surgery provides a wide range of surgical services for adult patients with ENT, head and neck diseases. Patients are referred from polyclinics, general practitioners, emergency services or transferred from other departments within the Ng Teng Fong General Hospital or other health facilities, including nursing homes, community and other hospitals. Our team of highly-trained ENT-Head & Neck surgeons and allied health professionals aim to provide the best possible care to our patients.



What is tinnitus?

Tinnitus means “ringing” and can be a ringing, whistling, buzzing or a multitude of different sounds a person hears in the ear or head. Tinnitus is the perception of sound without any actual external sound present. It is a common complaint and about 10% of people suffer from it.

What causes tinnitus?

Any ear disease can cause tinnitus. However, it is mostly caused by damage to the microscopic endings of the hearing nerve of the inner ear. The damage can be caused by viral infection, excessive noise exposure or ageing. Other causes include outer ear infection, ear tumours, wax accumulation, eardrum perforations or middle-ear infection. Quite often, there is no obvious cause for tinnitus.



Does tinnitus cause deafness?

Most patients with tinnitus have hearing loss but research indicates that tinnitus does not cause deafness.

What are the complications of tinnitus?

Prolonged tinnitus can cause undue anxiety and stress because it can be intrusive and patients worry that they may have an underlying tumour or are becoming deaf. Such anxiety and stress can make the tinnitus sound even louder. Some patients may even have difficulty sleeping. This will have a negative impact on daily work and social activities.



How is a diagnosis made?

A medical history, physical examination and a hearing test will help to identify where the tinnitus is coming from. An MRI scan may occasionally be required to rule out a tumour growing on the hearing or balance nerve. These tumours are rare but can cause tinnitus.



What are the treatment options?

Treatment of any underlying ear disease with medication or surgery could be the solution. Idiopathic tinnitus or tinnitus due to nerve damage is harder to treat. Certain kinds of medication may help, but generally the methods used are counselling, coping strategies and sound therapy. The aim of such therapy is to encourage habituation so that the patient eventually does not hear the tinnitus.

Sound therapy

Sound therapy works by reducing the difference, or contrast, between tinnitus sounds and background sounds. It helps the auditory system to habituate by becoming less “tuned in” and sensitive to tinnitus. Sound therapy should not be used to mask the tinnitus, rather it should mix/blend with it.

- Environmental sound therapy uses natural background sounds such as a noisy fan, traffic flowing through a window, a fountain or low levels of music to avoid the silence.
- Music therapy uses low levels of music or nature sounds.

Relaxation techniques

Relaxation techniques such as breathing exercises to reduce stress are a very helpful part of tinnitus management.

Distraction techniques

These are thought-stopping techniques that work by reducing the focus on tinnitus.

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