

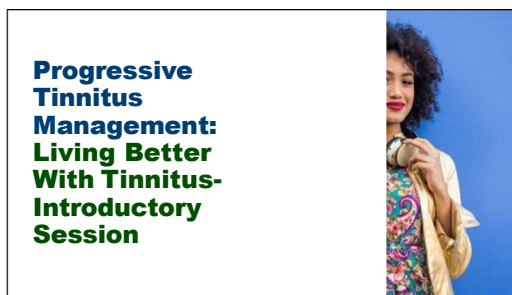
Progressive Tinnitus Management (PTM): Living Better with Tinnitus Workshops Facilitator Guide

The Living Better with Tinnitus Introduction Workshop is designed to:

- ❖ Engage the Veterans in contemplating the idea that one can live better with tinnitus even if tinnitus does not change
- ❖ Introduce concepts that are the foundation to the other Living Better with Tinnitus workshops
- ❖ Help the veterans begin to explore the impact of tinnitus in their lives and set realistic expectations
- ❖ Support the Veteran in shifting from focusing on the symptom (i.e., tinnitus) to focusing on what is possible to live better with tinnitus
- ❖ Provide simple strategies to improve quality of life with tinnitus

Everyone who has tinnitus is welcome to attend the introduction workshop even if tinnitus is not bothersome. Anyone could benefit from this workshop to learn more about tinnitus and how to improve their quality of life with tinnitus.

Slide 1



Welcome to Introduction to Living Better with Tinnitus.

- ❖ Pause throughout to allow for people to talk and share their experiences with tinnitus. People want to be heard and seen. Listening with empathy is meaningful and important.
- ❖ Some clinicians find that approximately 1/3 of the people who come to the introduction session go on to sign up for the follow-up sessions. The Veterans that need additional support and guidance are often


the ones who enroll in the other Living Better with Tinnitus workshops.

- ❖ Materials for participants may include Tinnitus and Hearing Survey, VA DoD Tinnitus FAQs, local Whole Health information.
- ❖ If questions about service connection for tinnitus arise, encourage Veterans to get help from a claims representative.

Slide 2

Safety for Virtual and Telephone Visits

- Are you at the address listed in VA medical record?
(If not, please let us know where you are in case of emergency)
- Is the phone number in your VA medical record current?
- Are you in a private, safe location?
- You cannot be driving (if you are, pull over or reschedule)
- In case of an emergency, do I have your verbal consent to contact emergency contact/services?



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- ❖ Slides 3-9 can be used for VVC classes.
- ❖ Follow your local guidance regarding VVC requirements.
- ❖ Ensure to document the verbalized consent for virtual group participation.

Slide 3

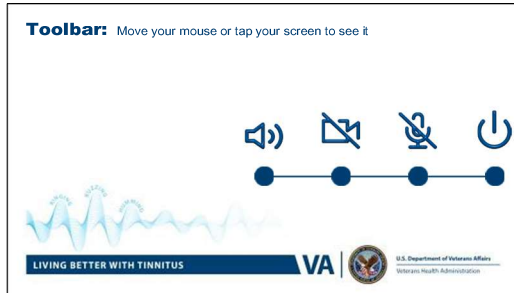
Virtual Etiquette

- Please put your cell phone on mute, or do not disturb
- Mute your microphone (if there's background noise around you)
- Use the chat box (when microphone doesn't work or there's background noise)
- Due to privacy laws, don't take any photographs or record any video or audio
- Please wear appropriate attire
- Please use respectful language
- Please refrain from using substances during a session
- If you need a bathroom break, please do not take your device with you

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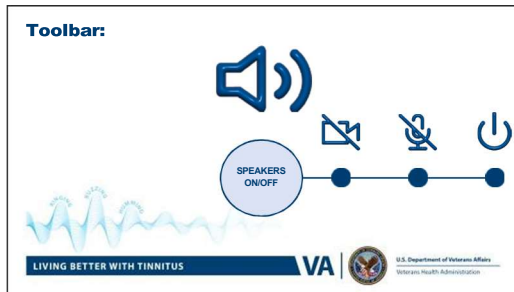
- ❖ Discuss virtual etiquette

Slide 4

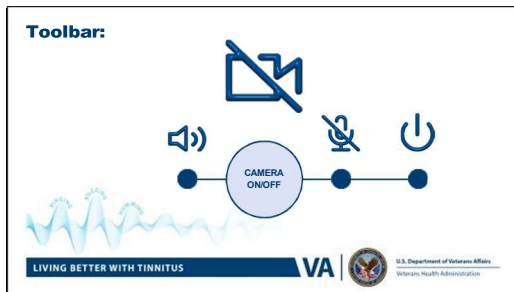


❖ Participants may require an overview of the toolbar functions. These reflect the toolbar functions at this time and may change over time.

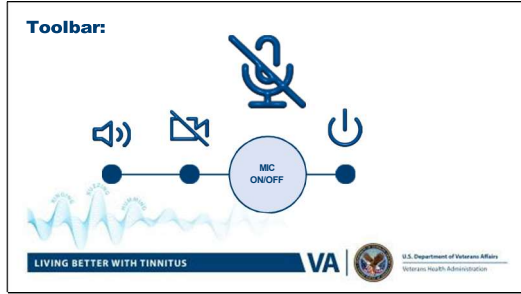
Slide 5



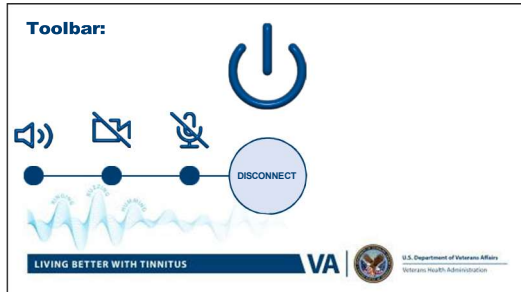
Slide 6



Slide 7

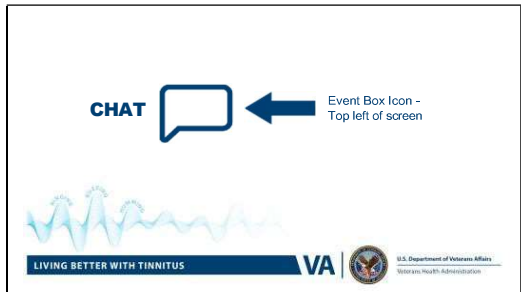


Slide 8



❖ If your computer freezes or you experience technical issues, you can disconnect and try to rejoin the meeting.

Slide 9



Slide 10



- ❖ Ask Veterans to silence their mobile devices before the group session begins to eliminate any distractions and prevent those connecting via mobile device from getting disconnected.

Slide 11



Please advise the Veterans the contact information for the Crisis Line was updated on a national basis and access was simplified.

Remind participants that if they are in a crisis at any time, qualified caring VA professionals are ready to help them.

“If you or anyone you know is in crisis: Call, click or text 24 hours a day /7 days a week/ 365 days, Free and Confidential.”

Slide 12

Introduction

What do you hope to get from today's session?




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Take the time to introduce yourself and have the participants introduce themselves.
Invite the veterans to state what they hope to get from the workshop.
Remember to keep the expectations realistic and obtainable.

Slide 13

How Do You Pronounce Tinnitus?

ti-night-us OR tin-uh-lus
Either is correct



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❖ Discuss slide content. Either pronunciation is correct.

Slide 14

Today's Workshop

PTM
Progressive Tinnitus Management

Has been adapted from the Progressive Tinnitus Management program originally developed by researchers at the National Center for Rehabilitative Auditory Research (NCRAR), in collaboration with Whole Health and VA Audiology.




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❖ This course is based on the Progressive Tinnitus Management program originally developed by researchers at the National Center for Rehabilitative Auditory Research (NCRAR), in collaboration with Whole Health and VA Audiology.

Slide 15

Tinnitus & Hearing Survey (THS)

Tinnitus, hearing problems, and sound tolerance problems sometimes occur together



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- ❖ The Tinnitus and Hearing Survey (THS) is a tool that can be used to help identify if the patient needs or desires intervention for tinnitus, hearing, sound tolerance or a combination of these.
- ❖ You will want to ensure that Veterans are not showing up for the Living Better With Tinnitus workshops hoping to focus on hearing problems that they attribute to tinnitus.
- ❖ This slide can be used even if you are not administering the THS. Tinnitus can often occur with hearing problems and/or sound tolerance problems.

Slide 16

Tinnitus & Hearing Survey

Today we will focus on Tinnitus.

In future workshops, we will focus on coping strategies to help with these problems!

A. Tinnitus

	No tinnitus problem	Yes, a small problem	Yes, a moderate problem	Yes, a big problem	Yes, a very big problem	
Over the last week, tinnitus kept me from sleeping.	0	1	2	3	4	
Over the last week, tinnitus kept me from concentrating on reading.	0	1	2	3	4	
Over the last week, tinnitus kept me from relaxing.	0	1	2	3	4	
Over the last week, I couldn't get my mind off of my tinnitus.	0	1	2	3	4	
	Total of each column					Grand Total

- ❖ Discuss that this portion of the THS covers tinnitus problems.

Slide 17

We will not focus on hearing problems.
For help with these problems, talk to your audiologist.

B. Hearing
 Over the last week, I couldn't understand what others were saying in noisy or crowded places.
 Over the last week, I couldn't understand what people were saying on TV or in movies.
 Over the last week, I couldn't understand what people with soft voices.
 Over the last week, I couldn't understand what was being said in group conversations.

	No, not a problem	Yes, a small problem	Yes, a moderate problem	Yes, a big problem	Yes, a very big problem
0	1	2	3	4	
0	1	2	3	4	
0	1	2	3	4	
0	1	2	3	4	
Total of each column					n/T

Discuss that this portion of the THS covers hearing problems.

- ❖ Many patients with hearing loss may attribute their hearing difficulties to tinnitus.
- ❖ Many patients with normal hearing and tinnitus could report hearing difficulties; such difficulties are likely related to distraction or auditory difficulties confused with tinnitus. It might be especially common if a person has TBI.
- ❖ TBI can cause both tinnitus and auditory processing problems even when there is no hearing loss.
- ❖ A handout with communication tips can be provided.
- ❖ A later workshop in this series includes strategies for improving communication.

Slide 18

We will not focus on sound tolerance problems.
For help with these problems, read the "What To Do When Everyday Sounds Are Too Loud" handout.

C. Sound Tolerance
 Over the last week, sounds were too loud or uncomfortable for me when they seemed normal to others around me.*

If you responded 1, 2, 3, or 4 to the statement above:
 Please list two examples of sounds that are too loud or uncomfortable for you, but seem normal to others:

*If sounds are too loud for you while wearing hearing aids, please tell your audiologist.

For office use only (II): M H N

	No, not a problem	Yes, a small problem	Yes, a moderate problem	Yes, a big problem	Yes, a very big problem
0	1	2	3	4	

- ❖ This portion of the THS covers sound tolerance problems.
- ❖ The question shown is not about having trouble understanding what others are saying in noisy environments.
- ❖ For help with these problems talk to your audiologist or read the handout What To Do When Everyday Sounds Are Too Loud.
- ❖ Here are some signs of a sound tolerance problem:
 - ❖ Do you cover your ears around certain sounds even when no one else does?
 - ❖ Do you wear hearing protection in quiet

environments because you are worried about unexpected loud sounds?

- ❖ Have you stopped doing things you want to do because you would have to be around sounds that are uncomfortable for you?
- ❖ Are you avoiding certain places, like grocery stores, because you are worried it will be too loud?
- ❖ Do you avoid sound or prefer to be in silence?

Slide 19

Let's Discuss...

Is there anything you want to be doing, but aren't doing because of your tinnitus?

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- ❖ Give each participant time to answer this question. Let them discuss how tinnitus is getting in the way of doing things they care about. This approach anchors the Veterans to motivate themselves to explore their own reasons for wanting to make a change. We are easing into the whole health approach by discussing values through a condition-specific lens. Later in the presentation we will expand upon this.
- ❖ Other possible questions to ask: How is tinnitus getting in the way of what matters to you? How would your day be different if you felt more comfortable with tinnitus?

Slide 20

Today We'll Learn About:

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❖ During this slide, provide an overview of the session's topics.

Slide 21

General Information About Tinnitus

Everyone will learn some important and valuable information about tinnitus.

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❖ During the “General Information about Tinnitus” lesson, the Veterans will learn valuable information about tinnitus.

Slide 22

Living Better with Tinnitus Workshops

Workshops that focus on learning and practicing coping skills for improving quality of life with tinnitus

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❖ During this lesson, Veterans will learn about the workshops available to learn and practice coping skills to improve quality of life with tinnitus.

Slide 23

Options to Support Your Wellbeing

We'll talk about using health and wellness options to support you in living better with tinnitus



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❖ Veterans will learn about using health and wellness options to support living better with tinnitus.

Slide 24

What Can I Do Now?

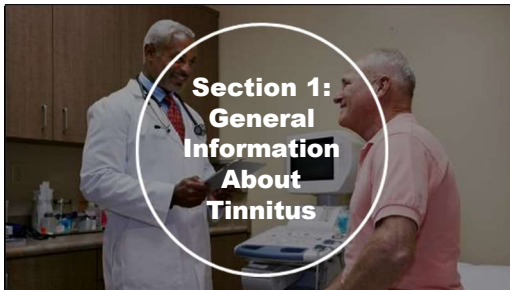
We will talk about some things you can start doing right away to live better with tinnitus



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❖ During the “What can I do now?” lesson, Veterans will learn what they can start doing now to live better with tinnitus.

Slide 25



**Section 1:
General
Information
About
Tinnitus**


❖ Discuss section 1 will cover general information about tinnitus.


Slide 26

What is Tinnitus?

Tinnitus is a ringing, humming, buzzing, or other sound in your head or ears that does not have an outside source.

(No Sound) → It's Sound!





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❖ Discuss slide content.

Slide 27

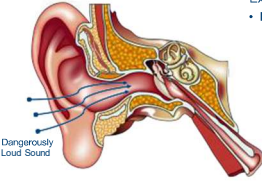
Risk Factors for Tinnitus




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Slide 28

Risk Factors for Tinnitus



- Exposure to dangerously loud sound
- Medications that are toxic to the ears
- Medical conditions of the ears
- Injuries to the head and neck
- Certain medical conditions
- Stress and lifestyle factors
- Jaw problems
- Hearing loss
- Ear wax
- Aging

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❖ Review some of the most common risk factors for tinnitus on the slide. Emphasize these are risk factors, not causes.

❖ Prevalence of tinnitus goes up with age and the incidence of hearing loss.

❖ The highest prevalence is associated with noise exposure.

❖ Tinnitus is the most common service-connected condition, but not every Veteran has it—even a Veteran who served right beside you may not have

tinnitus. It is possible for non-military activities to increase risk of developing tinnitus.


- ❖ If people ask about “dangerously loud sound”, refer to the Hearing Conservation Sound Scale – Slide 64
- ❖ For questions about medications, direct participant to talk to their pharmacist and prescribing provider. Advise the participant not to stop or change medication without medical approval.
- ❖ Possible toxic medications: some chemotherapies ending in -platin and IV antibiotics generally given in hospital for life threatening infections.


Slide 29

Tinnitus Research

At this time, researchers have not determined the cause(s) of tinnitus and cannot explain:

- Why some people develop tinnitus and others who share the same risk factors do not develop it;
- Why tinnitus is constant for some, but intermittent for others;
- Why tinnitus is bothersome to some, but not to others; and
- Why tinnitus is perceived as many different sounds such as ringing, buzzing, humming, or combinations of sounds.



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- ❖ At this time, researchers have not determined the cause(s) of tinnitus.

Slide 30

Theories of Tinnitus

- One leading theory is that tinnitus can occur when damage to the inner ear changes the signal carried by nerves to the parts of your brain that process sound
- While tinnitus may seem to occur in your ear, the phantom sounds are instead generated by your brain (in the area called the auditory cortex)
- Abnormal interactions between the auditory cortex and other neural circuits may play a role in tinnitus
- Studies have shown that some people with tinnitus have changes in these nonauditory brain regions

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❖ “One leading theory is that tinnitus can occur when damage to the inner ear changes the signal carried by nerves to the parts of your brain that process sound. A way to think about this is that while tinnitus may seem to occur in your ear, the phantom sounds are instead generated by your brain, in an area called the auditory cortex. Other evidence shows that abnormal interactions between the auditory cortex and other neural circuits may play a role in tinnitus. The auditory cortex communicates with other parts of the brain, such as the parts that control attention and emotions, and studies have shown that some people with tinnitus have changes in these nonauditory brain regions.”

❖ Reference:
<https://www.nidcd.nih.gov/health/tinnitus#6>

Slide 31


Tinnitus is **NOT the Same for Everyone**

- There is variability in:
 - What it sounds like
 - How often it is noticed
 - How it impacts your daily life



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❖ Discuss slide content.

Slide 32

How Common is Tinnitus?

- You are **NOT** alone. Tinnitus is **VERY** common!
- 30-50 million American adults have chronic tinnitus (10-15% of the adult general population)
- People with normal hearing can also have tinnitus
- People of **ALL** ages can have tinnitus, even children




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❖ Discuss slide content.

Slide 33

Tinnitus and Veterans

- Most common service-connected condition
- However, not all Veterans develop tinnitus

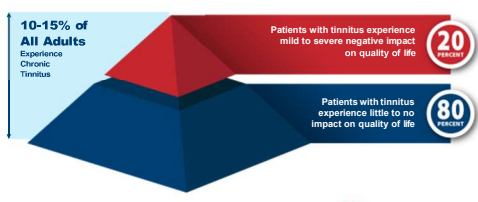


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- ❖ Not every Veteran develops tinnitus even if around hazardous noise.
- ❖ A Veteran who served right beside you may not have tinnitus even though you do.

Slide 34

Impacts of Tinnitus



10-15% of All Adults Experience Chronic Tinnitus

Patients with tinnitus experience mild to severe negative impact on quality of life **20 percent**

Patients with tinnitus experience little to no impact on quality of life **80 percent**

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- ❖ The tinnitus pyramid contains entire population of people who experience chronic tinnitus.
- ❖ It shows that tinnitus impacts people in different ways.
- ❖ Most people with tinnitus experience little or no impact on quality of life (about 80%).
- ❖ About 20% of those who have tinnitus experience a mild to severe impact on quality of life and seek clinical intervention (Dobie 2004). Most of these people only require some basic education and reassurance that their tinnitus does not reflect some serious medical condition.

- ❖ The Tinnitus Pyramid shows that patients have different needs, from simple education to long-term individualized intervention.
- ❖ Reference: Dobie R.A. (2004). Overview: Suffering from tinnitus. In Snow J.B. (Ed.) Tinnitus: Theory and management (pp. 1-7). Shelton, CT: PMPH-USA.

Slide 35



- ❖ In some people with bothersome tinnitus, the brain may respond to it as “something to be on the alert about”. We have a lot of unwanted noises in our everyday life, but for most of them, we can say they are not intrusive.
- ❖ Many sounds might be present without getting your attention. For example, traffic if you live on a busy street; the chiming of a grandfather clock in your house, a train if you live near the tracks.
- ❖ Your brain is full of strategies to keep you safe. One of those safety features is bringing your attention to sounds that you need to pay attention to, like car alarms or a doorbell at night.
- ❖ Sometimes that safety feature causes you to pay attention to sounds that aren't a threat—like your tinnitus.


Ref: Leaver AM, et al, (2011)
Dysregulation of limbic and auditory networks in tinnitus.
Neuron 69(1):33-43
Rauschecker JP, et al. (2010)
Tuning out the noise: limbic-

auditory interactions in tinnitus.
Neuron 66(6):819–826

Slide 36

Facts About Tinnitus

- There is no cure yet for tinnitus
- No way to silence tinnitus or to make it quieter
- Scientists are looking for a cure, but it has been challenging
- No research evidence shows that vitamins, supplements, medications or devices do any more than a sugar pill
- Beware of anyone telling you they can cure or quiet your tinnitus




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- ❖ The causes of tinnitus are not fully understood, which makes it challenging to develop a cure.

Slide 37

You CAN Feel Better Living With Tinnitus

There is hope!
It is possible to live better with tinnitus.
We will explore coping strategies to help you.



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- ❖ There are many chronic conditions that we don't have a cure for (e.g., pain, diabetes or thyroid problems), and we still can take healthy actions to live better with the condition. Through research, we have learned about effective strategies that can improve quality of life and health outcomes.
- ❖ Pay attention to the impact of trying things that you hope will make your tinnitus quieter; is it making your life better or are you more frustrated?

Slide 38

What Are Your Thoughts/Questions?

What are your thoughts about what I just shared?

What surprised you?



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- ❖ Ask participants for feedback on what they understood to clarify information as needed.
- ❖ This slide is a way to get feedback on what the participants understood and provides opportunities to clarify information as needed. Asking these questions helps participants know that you are interested in knowing and understanding their thoughts and will help ensure that the session remains interactive.

Slide 39



❖ If you are unable to use the video (e.g. VVC limitations, etc), familiarize yourself with the content so you can discuss it with your participants.

❖ Here is the transcript:

Sometimes when people are trying to figure out if they want to join a tinnitus workshop series, they'll understand that we can't cure tinnitus. What we'll be doing in those workshops won't result in their tinnitus sounding any different than it does before. And so sometimes it seems kind of like a black box to people.

What am I going to get out of this? Why, why am I going to put my time and energy into it? And so I'm wanting to give you just a little bit more of a feel for what happens in these sessions. A lot of what happens is being exposed to and learning and trying out different coping strategies.

And we can never really know ahead of time. Which strategies are going to be good for which people they don't all work for everyone But usually people can find something that works well for them so it's it's kind of a process of trying out a bunch of different strategies and paying attention to Does this make is my life better with this coping strategy?

Am I more comfortable? Is it easier for me to do the things I want to do with tinnitus when I'm using this coping strategy? So it's kind of like a Um, ongoing experimentation, just trying things out. And one

important, um, shift that people sometimes need to make is, this isn't true for everyone, but for a lot of people, they're kind of used to thinking of the solution being that their tinnitus will be quieter or they don't hear it.

And so that's what people will sometimes pay attention to. They'll try a coping strategy and listen to their tinnitus. And an important shift is to go from, what does this do for my tinnitus, to my tinnitus? Instead to, what is this doing to how I feel? So it's kind of the, the marker we're looking for. Am I more comfortable even though my tinnitus hasn't changed?

Is it easier for me to relax even though my tinnitus hasn't changed? Is it easier for me to fall asleep than it was before when I'm, when I'm using these coping strategies? So it's a, it's a lot of experimentation and paying attention to, Is my life better? Is it more comfortable? That's what we're aiming for.

It kind of depends on if you're doing this in a group or one on one, often people feel like it's nice to spend time in a group with other people who really get it, who understand the experience and if it's one on one, it can be just nice and supportive to spend some time with a provider who's open to focus, focusing on your well-being in this particular area of your life.

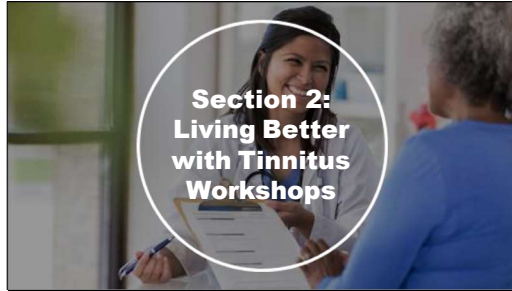
I'll also give a few examples of some of the coping strategies that

are covered in the group education sessions. Um, One is using sound, so there's a kind of a structured support in these sessions for experimenting with different sounds to see if they make you feel more comfortable or make it easier for you to do the things you want to do.

There's also time spent learning relaxation techniques and some time spent planning pleasant activities, which, um, Doesn't sound very flashy, but really we know that it makes a difference for people to, um, spend some time really planning to put activities in their lives that matter to them and that they enjoy.

Sometimes people think they kind of will, sometimes people want to put their lives on hold until the tinnitus is resolved before they get back to doing all the things they love. And this is a chance to start figuring out how to do all the things you love with tinnitus on board. So, that's some of what happens.

Slide 40



Slide 41

What Does “Living Better with Tinnitus” Mean?

We can't cure tinnitus, but...
We can learn to live better with tinnitus!



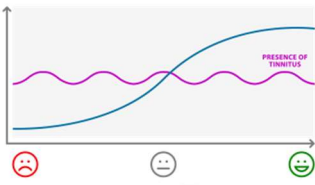
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- ❖ We can't cure tinnitus, but there are things you can do to live better with tinnitus. Let's explore what does that mean to you.

Slide 42

Living Better With Tinnitus

The purple line is your tinnitus.
The blue line is your journey towards living better with tinnitus.



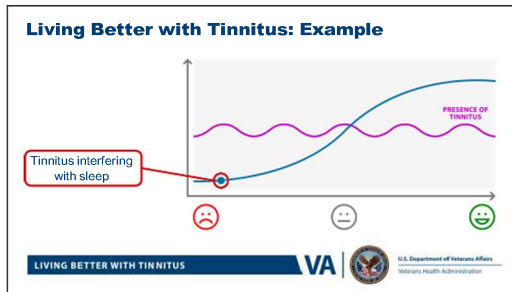
PRESENCE OF TINNITUS

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- ❖ The graphic illustrates that it is possible to learn how to live better with tinnitus even though tinnitus does not change.
- ❖ Living Better with Tinnitus does not mean you should just try to ignore your tinnitus. Notice on this slide there are three faces; a frowny face, a neutral face and a smiley face. The wavy line represents the presence of tinnitus. The blue line represents the process of discovering and

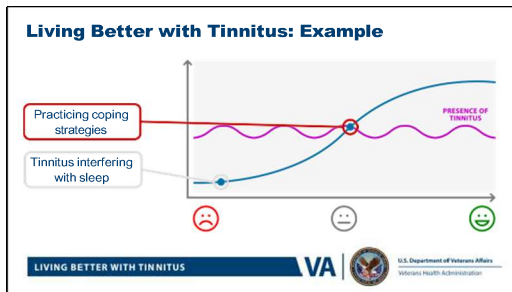
using the coping strategies that move you from frowny toward neutral and/or smiley even though the tinnitus does not go away. That's what we mean by living better with tinnitus. The journey to living better with tinnitus is a process of trial and error that takes patience, practice and commitment.

Slide 43



❖ In this example, tinnitus was reported to be interfering with sleep.

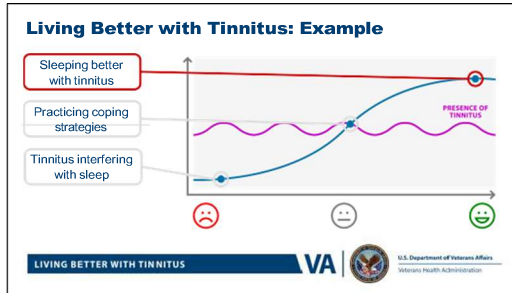
Slide 44



❖ Learning and practicing coping strategies can help a person sleep better even though tinnitus does not change.

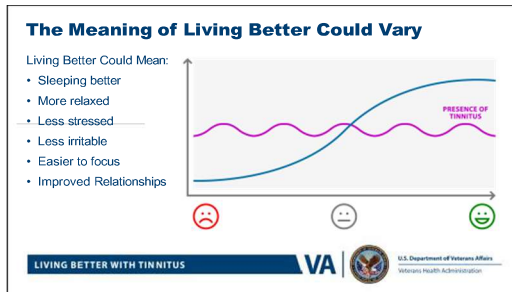
❖ This process takes commitment and effort. Nothing happens magically.

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- ❖ Practicing coping strategies and taking healthy actions can help the participant sleep better with tinnitus over time.

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- ❖ Living better can mean different things to different people. The blue line represents the process of finding out what works for the Veteran.
- ❖ Give some examples of what this might mean—sleeping better with tinnitus, feeling less anxious with tinnitus, relaxing with tinnitus, concentrating better with tinnitus, doing the things you want to do with tinnitus, improving your relationships, etc.
- ❖ Provider could ask: “Is there anything else here that you think should be added? “
- ❖ It just takes simple steps, simple actions, and being proactive.

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How Would You Live Better with Tinnitus?

What would it mean for **you** to live better with tinnitus?
What would that look like?
Let's discuss!

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- ❖ Invite participants to explore what “living better with tinnitus” means to them.
- ❖ Ask them what they would like to be doing but aren’t doing because of tinnitus.

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What Would Help You with Your Journey?

- To learn coping strategies for tinnitus?
- To receive guidance and coaching on Living Better With Tinnitus?
- To have ongoing support in taking steps towards better health and well-being?

We will cover these options at the Living Better with Tinnitus Workshops

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- ❖ Let’s begin to discover possible options to help Veterans with their journey. We will cover these options at the Living Better with Tinnitus Workshops.

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Living Better with Tinnitus Workshops

- **Introductory Session:**
Introduction to living better with tinnitus ← You are here!
- **Sound Session:**
Learn of the benefits of using sound to live better with tinnitus; establish tinnitus areas of focus and create a sound plan.
- **Planning Pleasant Activities Session:**
Plan enjoyable and/or meaningful activities to improve quality of life. Complete a personal health inventory and make a wellness goal.
- **Relaxation Session:**
Learn to calm the mind and relax the body to live better with tinnitus.
- **Final Session:**
Learn tools to improve communication; review skills and plans to sustain your strategies.
- **(Additional Session) Balancing Thoughts & Feelings Session:**
Learn how thoughts affect how you feel and how to change your mindset.

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- ❖ The facilitator should discuss the Living Better with Tinnitus Sessions and be flexible depending on the clinic resources (sequence, length, frequency, clinician availability). The facilitator should cover all the core components. Sessions can be offered in-person, virtual, group, or individual.
- ❖ There is a suggested sequence of sessions. If the order needs to change based on the availability of providers, change the order for your clinic on this slide. You may edit to fit your clinics specific needs.

❖ About Balancing Thoughts and Feelings Additional Session: If you are not going to offer Balancing Thoughts and Feelings, take that line off. This session is about learning to have balanced thinking to help you move in a healthier direction for a fuller, more satisfying life. When talking about balancing thoughts and feelings, avoid saying anything about changing how you feel about tinnitus. The point is not to change how they feel about tinnitus. It's to change how they feel.

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Your Whole Health Journey

- Whole health puts you, not your symptoms, at the center of your health care
- We partner and support you with your health decisions and what matters to you

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- ❖ The Whole Health approach to care is based on what is important to you, going beyond illnesses and conditions, and focusing on getting healthier no matter what is going on.
- ❖ The Circle involves 8 areas of health and taking simple everyday actions that moves you towards better health and doing things that matter to you. It's not about focusing on just your ears, but rather paying attention to all of you.

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Your Whole Health Journey

- What Matters Most to You?

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- ❖ Give participants time to answer the question about what matters to motivate them to explore their own reasons for wanting to make a change.
- ❖ Examples of other questions to get to what matters:
 - ❖ What brings you joy and happiness every day?
 - ❖ What are you grateful for?
 - ❖ What do you want your health for?
 - ❖ What's on your bucket list?
 - ❖ How do you like to spend your days?
 - ❖ What gives your life meaning?

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Whole Health Video

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- ❖ Familiarize yourself with the transcript of this video if you are unable to share it with your patients.

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Improving Your Well-being

Anything That Improves Your Well-being Could Help You Live Better With Tinnitus

- Health and Wellness classes in the VA
- Community Wellness Classes
- Support Groups for any Condition
- Seeing a therapist to support your emotional well-being
- Self-care

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- ❖ Any steps to improve wellbeing can improve living with chronic conditions including tinnitus.
- ❖ Be prepared to talk about availability of behavioral health or mental health services at your VA. Get to know your local facility's process for referring to behavioral health.
- ❖ For same day referrals or immediate need, find out your Primary Care Mental Health Integrated (PCMH) structure to get short-term behavioral health support.

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Whole Health Resources

Whole Health resources available (at your site)

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- ❖ Provide local whole health resources and contact information.


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Whole Health and Tinnitus

What are your thoughts about what I just shared?

What surprised you?



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❖ Ask participants for feedback on what they understood to clarify information as needed.

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What Can I Do Now?

- Protect Your Ears From Dangerously Loud Sounds
- Use Sound
- Hearing Aids
- Manage Your Other Chronic Conditions



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❖ Discuss these self-care options available to participants.

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Loud Sounds Can Damage Your Hearing Faster

Dangerously loud sound is the most common risk factor for tinnitus and hearing loss in adults.

- However, not everyone who is exposed to dangerously loud sound develops tinnitus.



-  Firing a gun is so loud it can damage your hearing immediately
-  Using a chainsaw for two minutes can damage your hearing
-  Mowing the lawn with a gas push mower for two hours can damage your hearing
-  Driving in city traffic for eight hours can damage your hearing

↑ Extremely Loud
↓ Very Loud
↓ Loud


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- ❖ Dangerously loud sound is the most common risk factor for tinnitus and hearing loss in adults. The louder the sound is, the faster it can harm your ears.


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Protect Your Ears From Dangerously Loud Sound

Foam earplugs are effective, but only when used properly.



- Earmuffs **MUST** fit snugly around the ears.
- Wearing glasses or a hood under earmuffs will cause them to be less effective.
- If the foam of the earmuffs becomes stiff, it's time to replace them.





IMPORTANT TO NOTE:
Products labeled as noise-cancelling aren't necessarily hearing protection. Be sure that whatever you choose for hearing protection has a Noise Reduction Rating (NRR).

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- ❖ Discuss the importance of ear protection.
- ❖ Ear protection is effective but only when used properly and consistently.

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Using Sound to Live Better with Tinnitus

<p> SOUND CAN HELP YOU:</p> <ul style="list-style-type: none"> • Feel more comfortable • Do the things you want to do (sleep, relax, concentrate on reading or computer work, etc.) • Participate in things or activities that are important to you • Feel better even if your tinnitus doesn't change 	<p> SOUND CAN'T HELP YOU:</p> <ul style="list-style-type: none"> • Cover or hide your tinnitus at a safe and comfortable volume • Make your tinnitus go away • Change your tinnitus
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- ❖ Discuss these realistic expectations of using sound to live better with tinnitus.
- ❖ What are some sounds you like? Are there sounds that remind you of something very pleasant from the past? Music from your younger years?
- ❖ Elicit examples from people of using sound successfully to feel better or do what you want to do.
- ❖ Encourage people to explore what they already have in their house for sound (radio, fan, Alexa, smartphone, Bluetooth speaker, etc.), and point out that

the Living Better With Tinnitus Workshops will go into a lot more detail.

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Living Better with Tinnitus: Hearing Aids

- Hearing aids can help with a hearing problem and with tinnitus.
- Most people say they notice their tinnitus less when they're wearing hearing aids.
- Hearing aids can allow you to hear and communicate more easily, which can:
 - Reduce listening effort and stress
 - Make it easier to have conversations
 - Reduce isolation
 - Improve participation in activities that you enjoy



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- ❖ Hearing aids can help with a hearing problem and with tinnitus.
- ❖ Discuss your hearing aid information and services at your local clinics.

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What Else Can Help You Live Better with Tinnitus?

- Managing chronic conditions is essential in supporting your health and well-being
- Sleep, PTSD, anxiety, chronic pain, etc. might impact life with tinnitus
 - These don't cause tinnitus, but they are the things that may contribute to how much other things (like tinnitus) bother you

How are you doing managing your chronic conditions?
What resources are you using to manage them?
Do you need more resources?




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- ❖ Managing chronic conditions is essential in supporting your health and wellbeing. Share wellness options available at your facility with the participants.
- ❖ Collaborate with your local Whole Health partners, Primary Care, and other health care professionals for additional resources for managing chronic conditions.

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In Conclusion

- Know and manage your risk factors
- Take action to improve your health
 - Simple daily actions can go a long way!
- Manage your expectations
 - There is no cure for tinnitus, but you can learn to live better with tinnitus!




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- ❖ Taking one small step to improve your overall health can help you cope better with tinnitus or other chronic conditions.
- ❖ If people ask about medications, tell them if you notice a difference in your tinnitus when you start or stop taking medication, ask your doctor about it.

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Take Aways

- What is something new or helpful that you learned?
- What is one small step that you will take to start living better with tinnitus?



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- ❖ Ask participants for feedback on what they will implement or take away, and provide clarification as needed.
- ❖ Other questions to consider:
 - ❖ What do you think will be the benefit of learning ways to live better with tinnitus?
 - ❖ Of what we talked about, what are you willing to do?
 - ❖ What is one small action you will take?
 - ❖ How might this fit in your day to-day living?
 - ❖ How is this for you?
 - ❖ Is there something here that surprised you?
 - ❖ Was there anything new you learned?
 - ❖ How does this relate to your life?

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Living Better with Tinnitus Workshops

- Days of week and time of day
- Virtual options?
- In-person options?
- Group vs one-on-one?
- Clinic contact information




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❖ Provide specific local workshop information.

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Tinnitus Resources

NCRAR: <https://www.ncrar.research.va.gov/ClinicianResources/index.asp>
DOD Veterans website for Tinnitus: <https://www.hearing.health.mil/Education/Tinnitus>
National Institute on Deafness and Other Communication Disorders: <https://www.nidod.nih.gov>
Ida Institute: <https://idainstitute.com/books/tinnitus/>
MyHealthVet (MHV): Help Desk at 1-877-327-0022 or <https://www.myhealth.va.gov>
VA Mobile Apps: <https://mobile.va.gov>
Whole Health Resources for Veterans: <https://www.va.gov/wholehealth>
VA Office of Connected Care: Help Desk 1-866-651-3180 or <https://www.connectedcare.va.gov>
Breathing, Meditation, Mindful Movement, & Guided Rest: <https://www.veteransyogaproject.org/practice>
National Institutes of Health (NIH): <https://clinicaltrials.gov>
Check out the iPhone or Android App Stores: nature sounds, relaxation, wellness apps




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❖ These are some suggested resources to share. These resources are also located in the resource handout of this course.

❖ You may have locally approved resources from your patient education committee that you may want share.

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Questions?



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