



# Consideration of Unani basics in the Prevention & management of Tinnitus (Taneen) -A Review Article

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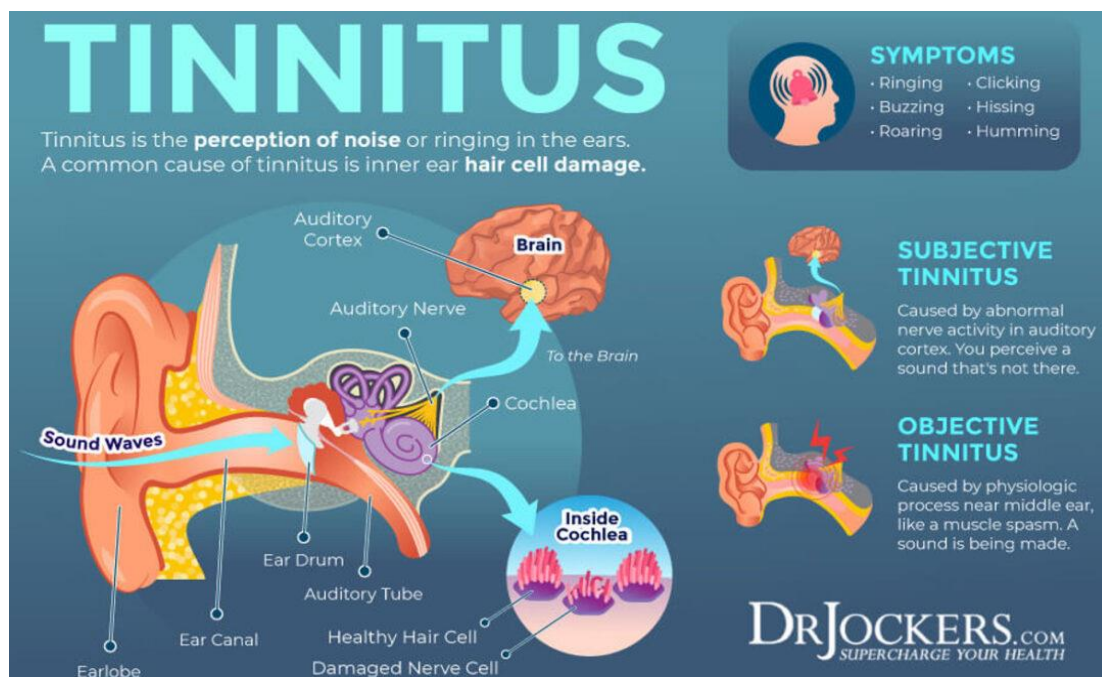
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**Abstract:** Tinnitus-the perception of sound in the absence of an actual external sound-represents a symptom of an underlying condition rather than a single disease. Several theories have been proposed to explain the mechanisms underlying tinnitus. Tinnitus generators are theoretically located in the auditory pathway, and such generators and various mechanisms occurring in the peripheral auditory system have been explained in terms of spontaneous otoacoustic emissions, edge theory, and discordant theory. Those present in the central auditory system have been explained in terms of the dorsal cochlear nucleus, the auditory plasticity theory, the crosstalk theory, the somatosensory system, and the limbic and autonomic nervous systems. Treatments for tinnitus include pharmacotherapy, cognitive and behavioral therapy, sound therapy, music therapy, tinnitus retraining therapy, massage and stretching, and electrical suppression. This paper reviews the characteristics, causes, mechanisms, and treatments of tinnitus. In Unani system of medicine various plant used in treatment or control the Tinnitus. Several House Hold remedies used in treatment of Tinnitus since ancient Unani System of Medicine.

**Keywords:** Tinnitus, Prevention and Treatments tinnitus, Herbal Medicine used in Treatment of Tinnitus

## A. Introduction of Tinnitus

Tinnitus is classically described as the presence of high-pitched ringing or buzzing that is usually only audible to the affected individual. Most tinnitus is subjective, meaning the examiner cannot hear it. However, objective tinnitus can arise from an aneurysm and can be heard by the examiner. The presence of objective tinnitus should include investigations for aneurysms, temporo mandibular joint disease, and tensor tympani muscle spasm. This activity reviews the evaluation and management of tinnitus and highlights the role of inter-professional team members in collaborating to provide well-coordinated care and enhance outcomes for affected patients. Tinnitus is defined as a sound a person hears that is generated by the body, rather than by an outside source. Most tinnitus is subjective. This means the examiner cannot hear it, and there are no tools to measure or hear that sound. Objective tinnitus can arise from an aneurysm. This can be objectified and heard by the examiner. Other objective tinnitus investigation includes temporo mandibular joint disease (TMJD) and tensor tympani muscle spasm.



Almost everyone at one time experiences tinnitus. The American Tinnitus Association estimates that 10 million people suffer from tinnitus. It is also common in non-industrialized countries. Military personnel has a high incidence of tinnitus due to loud explosions and gunfire. It is also seen in the movie and stage workers who prepare scenes with explosions and gunfire. Musicians who are exposed to loud noise get tinnitus, for example, drummers and those who perform in front of loudspeakers. Children may have tinnitus, but it is mostly unrecognized because they do not recognize the disorder. The usual history is a worker who was exposed to very loud factory noise where workers had to shout to be heard. Many workers develop high-tone hearing loss, but only a small percentage also have tinnitus. Hyperacusis also can accompany tinnitus. In these cases, certain ordinary sounds like closing doors, moving chairs, and books dropping so loud and strong that they are extremely uncomfortable or sometimes unbearable.

## What Is Tinnitus?

- Constant or on and off ringing in the ear.
- Can affect one or both the ears at the same time.
- Tinnitus is not a disease but a symptom that something is wrong.
- Tinnitus is often the first symptom of hearing loss.
- Can be the result of several health conditions like ear infections, brain tumors, thyroid, etc.
- Prolonged exposure to high-volume noise can also cause tinnitus over time.



The word tinnitus is derived from a latin word ‘tinnire’ which means a “jingle” or “to ring” [1, 2]. It is commonly defined as ringing of sound or noise in the ear by the patient without any external stimulation [3, 4]. It accounts for a notable part of visit in ENT clinics and has been estimated to involve about 5-15% of adult population [5]. Tinnitus affects one third of adults at some time in their lives, whereas ten to fifteen percent are disturbed enough to seek medical evaluation [6]. Most of the unani physicians have defined the tinnitus in the name of Taneen wa Dawi and explained it is a ringing sound in the ear, or a condition in which patient hears non-existing voices [7,8]. According to Allama Nafees ‘Taneen’ means ‘tasht ki khakhnahat’ and taneen is called where patient hears non-existing voices.

This sound may appear continuously or time to time [9]. Among unani physicians two terms are used to define tinnitus:

Taneen is called when the sound is of high pitch [9-11].

Dawi is called when the sound is of low pitch [9, 11, 12].

### B. Classification of Tinnitus (Taneen)

Tinnitus can be classified as:

Subjective tinnitus (Taneen-e-zati): which is experienced only by the patient [1, 7].

Objective tinnitus (Taneen-e-ghair zati): which is audible to both patient and examiner [1, 7].

### C. Causes of Tinnitus (Taneen)

The main causes of Tinnitus (Taneen) mentioned in unani literature are:

- Congestion of head with fluids and morbid material (Mawad wa Fuzalat-e-Sar) [9].
- Extreme dryness and hungriness (Yaboosat wa Faqah) [9].
- General weakness (specially weakness of the hearing faculties) (Zoaf wa Natawani) [9].

- Others: Indigestion, excessive flatus, general body weakness, anemia, presence of wax in the ear, ghaleez riyah, diversion of waste material towards ear [9].



In many people, tinnitus is caused by one of the following:

- I. Hearing loss.** There are tiny, delicate hair cells in your inner ear (cochlea) that move when your ear receives sound waves. This movement triggers electrical signals along the nerve from your ear to your brain (auditory nerve). Your brain interprets these signals as sound. If the hairs inside your inner ear are bent or broken this happens as you age or when you are regularly exposed to loud sounds they can "leak" random electrical impulses to your brain, causing tinnitus.
- II. Ear infection or ear canal blockage.** Your ear canals can become blocked with a buildup of fluid (ear infection), earwax, dirt or other foreign materials. A blockage can change the pressure in your ear, causing tinnitus.
- III. Head or neck injuries.** Head or neck trauma can affect the inner ear, hearing nerves or brain function linked to hearing. Such injuries usually cause tinnitus in only one ear.
- IV. Medications.** A number of medications may cause or worsen tinnitus. Generally, the higher the dose of these medications, the worse tinnitus becomes. Often the unwanted noise disappears when you stop using these drugs. Medications known to cause tinnitus include nonsteroidal anti-inflammatory drugs (NSAIDs) and certain antibiotics, cancer drugs, water pills (diuretics), antimalarial drugs and antidepressants.

### Other causes of Tinnitus

Less common causes of tinnitus include other ear problems, chronic health conditions, and injuries or conditions that affect the nerves in your ear or the hearing center in your brain.

- I. Meniere's disease.** Tinnitus can be an early indicator of Meniere's disease, an inner ear disorder that may be caused by abnormal inner ear fluid pressure.



- II. **Eustachian tube dysfunction.** In this condition, the tube in your ear connecting the middle ear to your upper throat remains expanded all the time, which can make your ear feel full.
- III. **Ear bone changes.** Stiffening of the bones in your middle ear (otosclerosis) may affect your hearing and cause tinnitus. This condition, caused by abnormal bone growth, tends to run in families.
- IV. **Muscle spasms in the inner ear.** Muscles in the inner ear can tense up (spasm), which can result in tinnitus, hearing loss and a feeling of fullness in the ear. This sometimes happens for no explainable reason, but can also be caused by neurologic diseases, including multiple sclerosis.
- V. **Temporo-mandibular joint (TMJ) disorders.** Problems with the TMJ, the joint on each side of your head in front of your ears, where your lower jawbone meets your skull, can cause tinnitus.
- VI. **Acoustic neuroma or other head and neck tumors.** Acoustic neuroma is a noncancerous (benign) tumor that develops on the cranial nerve that runs from your brain to your inner ear and controls balance and hearing. Other head, neck or brain tumors can also cause tinnitus.
- VII. **Blood vessel disorders.** Conditions that affect your blood vessels — such as atherosclerosis, high blood pressure, or kinked or malformed blood vessels — can cause blood to move through your veins and arteries with more force. These blood flow changes can cause tinnitus or make tinnitus more noticeable.
- VIII. **Other chronic conditions.** Conditions including diabetes, thyroid problems, migraines, anemia, and autoimmune disorders such as rheumatoid arthritis and lupus have all been associated with tinnitus.

#### D. Diagnosis and investigations of Tinnitus

- Detailed history along with general and ENT examination is very important [1,4].
- Complete haemogramme [1, 4].
- Pure tone audiometry / impedance audiometry [1, 4, 20].
- Speech discrimination score (SDS) and Speech reception threshold (SRT) [1, 4, 20].
- Tinnitus matching ENG
- CT scan of CP angle [1, 4, 20].

#### E. Pathophysiology of Tinnitus

When there is a danger or threat, humans normally react with a typical fight or flight response. This is the reason why the onset of tinnitus can be so distressing. A broken finger does not necessarily trigger this response, but tinnitus does. Cognitive therapy is done to stop the unwanted reaction.

However, stress is not a cause of tinnitus. Because humans cannot objectify tinnitus, the pathophysiology is not understood. Lesions that put pressure on the eighth cranial nerve may cause tinnitus. An increase in fluid pressure in the inner ear causes tinnitus. Symptoms associated with increased inner ear pressure include hearing loss, vertigo, tinnitus, and feeling of pressure in the ear. MRI shows that many areas of the brain are involved in tinnitus including the cognitive and emotional areas, as well as the auditory. Sound first enters the brain via the amygdala center. Therefore, learning that tinnitus is not a danger is therapeutic

According to unani physicians diversion of ghaleez akhlat wa riyah (waste material) from the brain towards ear is a causative factors for tinnitus. Malnutrition, dryness, starvation and general weakness also predispose the tinnitus [9]. The mechanisms of subjective tinnitus are often obscure. While it is not surprising that direct trauma to the inner ear can cause tinnitus, other apparent causes (e.g. temporomandibular joint dysfunction) are difficult to explain [16]. It may be caused by increased neural activity in the auditory brainstem, where the brain processes sounds, causing some auditory nerve cells to become over-excited. The basis of this theory is that many with tinnitus also have hearing loss [17].

#### **F. Clinical features of Tinnitus (Alamat-Taneen)**

Tinnitus is most often described as a ringing in the ears, even though no external sound is present. However, tinnitus can also cause other types of phantom noises in your ears, including:

- Buzzing
- Roaring
- Clicking
- Hissing
- Humming

Most people who have tinnitus have subjective tinnitus, or tinnitus that only you can hear. The noises of tinnitus may vary in pitch from a low roar to a high squeal, and you may hear it in one or both ears. In some cases, the sound can be so loud it interferes with your ability to concentrate or hear external sound. Tinnitus may be present all the time, or it may come and go.

In rare cases, tinnitus can occur as a rhythmic pulsing or whooshing sound, often in time with your heartbeat. This is called pulsatile tinnitus. If you have pulsatile tinnitus, your doctor may be able to hear your tinnitus when he or she does an examination (objective tinnitus).

The symptoms appear in tinnitus are ringing sound in ears, booming sensation in ears, roaring, chirping and whooshing sound in the ears, buzzing type or clicking or rushing sound, dizziness, tinnitus with hearing loss. It is more Unilateral but may be bilateral. Tinnitus also may be continuous or intermittent, fluctuated. It is more audible in silent environment, stressful condition and at night [18, 19].

According to the unani scholar several symptoms appear in tinnitus (taneen) on the basis of causative factors: [9]

- Heaviness in ear and head with tinnitus (taneen) (If the cause is congestion of head with fluids and morbid material).
- Sound in the ear is increased in empty stomach or starvation (if the cause is extreme dryness and hungriness).

Tocainide is the latest drug used for treatment.

Use of tinnitus maskers (if no cause is found).

#### **G. Diagnosis and investigations of Tinnitus**

1. Detailed history along with general and ENT examination is very important [1, 4].
2. Complete haemogramme [1, 4].

3. Pure tone audiometry/impedance audiometry [1, 4, 20].
4. Speech discrimination score (SDS) and Speech reception threshold (SRT) [1, 4, 20].
5. Tinnitus matching ENG
6. CT scan of CP angle [1, 4, 20 ].

## H. Complications of Tinnitus

Tinnitus affects people differently. For some people, tinnitus can significantly affect quality of life. If you have tinnitus, you may also experience:

- Fatigue
- Stress
- Sleep problems
- Trouble concentrating
- Memory problems
- Depression
- Anxiety and irritability
- Headaches
- Problems with work and family life

Treating these linked conditions may not affect tinnitus directly, but it can help you feel better.

## I. Treatment of Tinnitus

In conventional medicine, medical and surgical method of treatment is applied in case of tinnitus [1, 4, 13 ].

### Medical

- a. Treatment of cause is most important.
- b. Reassurance to the patient.
- c. Conservative treatment such as vasodilators, sedatives, vitamins and tranquilizers.
- d. Tocainide is the latest drug used for treatment.
- e. Use of tinnitus maskers (if no cause is found).

### Surgical

- Surgical treatment depending upon the cause.
- Endolymphatic sac decompression.
- Intratympanic injection of alcohol.
- Cryotherapy for cochlear destruction.
- Cochlear nerve section if no hearing.

## J. Prevention of Tinnitus

In many cases, tinnitus is the result of something that can't be prevented. However, some precautions can help prevent certain kinds of tinnitus.

- **Use hearing protection.** Over time, exposure to loud sounds can damage the nerves in the ears, causing hearing loss and tinnitus. Try to limit your exposure to loud sounds. And if you cannot avoid loud sounds, use ear protection to help protect your hearing. If you use chain saws, are a musician, work in an industry that uses loud machinery or use firearms (especially pistols or shotguns), always wear over-the-ear hearing protection.
- **Turn down the volume.** Long-term exposure to amplified music with no ear protection or listening to music at very high volume through headphones can cause hearing loss and tinnitus.
- **Take care of your cardiovascular health.** Regular exercise, eating right and taking other steps to keep your blood vessels healthy can help prevent tinnitus linked to obesity and blood vessel disorders.
- **Limit alcohol, caffeine and nicotine.** These substances, especially when used in excess, can affect blood flow and contribute to tinnitus.

## K. Management of Tinnitus

Tinnitus isn't a condition or disease. It's a symptom of other conditions. Here are some steps your provider may take to learn more about your tinnitus:

- I. Physical examination.** They'll check your ears for any obvious problems. They may check for signs of pulsatile tinnitus.
- II. Medical history.** They may ask if other family members have hearing loss, if you spend a lot of time around loud noises or a loud noise from a single event. They may ask what medications you take.
- III. Hearing test (audiometry).** This test checks your ability to hear a range of tones, displaying your results in an audiogram.
- IV. Tympanometry.** Your provider checks your eardrum with a handheld device called a tympanometer that shows your results in a tympanogram.
- V. Magnetic resonance imaging.** This test produces detailed images of your body without using X-rays.

## 6 Home Remedies For Tinnitus



### Identify Your Triggers

Identify and avoid things that you know will trigger your tinnitus!



### Give Up Smoking

Smoking is known to have many negative effects on tinnitus.



### Get Rid of Earwax

Remove your earwax and use ear drops to prevent earwax buildup!



### Tinnitus Sound Therapy

Use music or ambient sounds for distraction. Or, try a sound therapy app!



### Manage Stress Levels

Tinnitus has a strong link to stress; try finding activities to reduce it!



### Get Eight Hours of Sleep

Try getting good amounts of sleep - it will help relieve your symptoms!



If your healthcare provider has ruled out medical conditions apart from hearing loss, their next step is recommending ways to manage the impact of tinnitus on your life. Here are some examples:

- **Hearing aids.** Many people who have tinnitus also have hearing loss. Hearing aids may help provide relief from tinnitus by making sounds louder and the tinnitus less noticeable. For example, hearing aids may increase the volume of soft sound in your environment, like the noise made by your refrigerator. Obviously, hearing aids make it easier for you to hear, which may make it easier for you to ignore tinnitus.
- **Sound generators.** These devices produce and deliver sounds to your ears that mask tinnitus. For example, the sound generator may deliver soothing sounds like a shower or quiet rain. Some people may benefit by using hearing aids that include sound generators.
- **Environmental enrichment devices.** You can create your own way of masking tinnitus. Tabletop sound machines that generate soothing background noise, recordings of music, nature or other sounds or apps for smartphones and tablets can make tinnitus less noticeable.
- **Relaxation techniques.** Tinnitus can be frustrating and stressful. Stress and frustration may make tinnitus more noticeable. Learning techniques to increase relaxation and ease stress can help people better deal with the frustrations of tinnitus.
- **Counseling options.** Some people benefit from mental wellness therapies like cognitive behavioral therapy (CBT) or acceptance and commitment therapy (ACT). These therapies help people learn how to pay less attention to tinnitus.

#### L. Treatment of Tinnitus (Taneen) in unani system of medicine

Usool-e-Ilaj (Principle of treatment) In the Unani system of medicine, the main emphasis of Usool-e-Ilaj are [9]:

- Use of Tanqiya-e-Dimagh and Islahe Meda wa Hazam.
- Use of Murattib Advia wa Aghzia.
- Use of Muqawwi Aam wa Muqawwi Dimagh Advia wa Aghzia. Ilaj (Treatment)

There are four treatment methods, or modalities:

- A. Ilaj-bil-Dawa (pharmacotherapy),
- B. Ilaj-bil-Ghiza (dietotherapy),
- C. Ilaj-bil-Tadabeer (regimental therapy) and
- D. Ilaj-bil-Yad (manual therapy /surgery).

##### a) Ilaj-bil-Dawa (Pharmacotherapy) of Tinnitus

- I. As Tanqiya-e-Dimagh and Islahe Meda wa Hazam drugs, Habbe Ayarij 2BD, Jawarish Jalinoos first and after that Sheerah Badiyan 7gm, Sheerah Tukhme Kasoos, Sheerah Maweez Munaqqa in the same quantity in the Arq Badiyan along with Gulqand 20 gm can be given twice daily in the morning and evening. Jawarish kamooni 5 g after meal twice daily if the cause is congestion of head with fluids and morbid material (Mawad wa Fuzalat-e- Sar) [21].

- II. As Murattib Advia wa Aghzia Luab Behdana 3 gm, Sheerah Unnab 9 pieces, Sheerah Tukhme Kaddu Shireen 5 gm in Arq Gau Zaban 120 mL along with Sharbat Banafsha 20 mL can be given twice daily Roghan Banafsha, Roghan Gul, or Roghan Kahu 2 drop any one can be applied in the ear [9,21].
- III. As Muqawwi Aam and in anaemia, Qurs Faulad 1tab, Jawarish Jalinoos 5 gm twice daily may be given [9,21].
- IV. As brain tonic (Muqawwi Dimagh), Khamira Gau Zaban Sada 5 gm in the morning and Itrifal Muqawi Dimagh 7 g at bed time [9, 21].

#### b) Ilaj-bil-Ghiza (Dieto-therapy) of Tinnitus

- I. Diet such as Jaiyyad ul Kaimus (normal chyme), Lateef (tense diet) and Saree-ul-Hazm (fast appetizer) are recommended [9, 11, 21].
- II. Patient should take energetic medicine such as milk, egg, butter, chicken soup [21].
- III. Avoid excessive intake of garlic, onion and highly spicy diet [11, 21].

#### c) Ilaj-bil-Tadabeer (Regimental therapy) of Tinnitus

- I. Inkabab: through Mulattif wa Murattib Advia, steam inhalation of Decoction of Podina, Barghe Neelgiri, Biranjasif, Gule Banafsha each 10 gm can be given for this purpose [9, 11, 21].
- II. Pashwiya (Foot bath) by decoction of Barge Beri and Badiyan [9, 21].
- III. Hijama (Cupping) on pre auricular region, neck may be beneficial [9, 11, 21].
- IV. Qutoor (Drop) by Roghan Gul, Roghan Badam Shireen along with sirka 1 drop may be beneficial for these type of patient [9, 11, 21].

#### d) Ilaj-bil-Yad (Manual therapy) of Tinnitus

Ilaj-bil-Yad is manual therapy or surgery.

### M. Home Remedies for Tinnitus

It is not easy to find out what exactly is causing tinnitus, but there are ways you can reduce the ringing in your ears naturally. Here's how you can manage your case of tinnitus with simple home remedies.

#### 1. Onion juice can help

Onions have antibacterial properties and other medicinal benefits that can be useful in treating infections that may be causing your tinnitus. All you have to do is cut onions into small pieces, microwave them, and strain them to extract the juice. Put this onion juice in your ear and leave it there for a few minutes. Drain the juice out by tilting your head. Do this a few times every week to see improvement in your condition. Any side effects experienced should be reported to a medical professional immediately.

#### 2. Use a saline solution

Saline solution is very helpful in opening blocked passages or getting rid of excess fluid that can be causing tinnitus. This is a very good solution for those who suffer from tinnitus caused by clogged sinuses. In a warm glass of water, add salt to make a saline solution and also glycerin. Put the solution in each of your nostrils to open up and clear blocked nasal passages to reduce the chances and cases of tinnitus.

### 3. Put a few drops of warm mustard oil in the ear(s)

Mustard oil increases blood circulation naturally since it is a rubefacient. It also has antifungal and anti-inflammatory properties and thus is very helpful in treating infections in your ear. Moreover, mustard oil prevents the buildup of earwax, which can also be a cause of tinnitus.

Microwave a small amount of mustard oil until it is warm, and put a few drops of it in the affected ear. Let it stay there for a few minutes, and then tilt your head to drain it out. Repeat it every day for a few weeks to reap its benefits.



### 4. Consume pineapple

Shifting to a more anti-inflammatory diet reduces tinnitus and prevents any progression of age-related hearing loss. Pineapple naturally has anti-inflammatory properties because of an enzyme it contains called bromelain. Therefore, consuming pineapple every day is a good way to deal with tinnitus and reduce your chances of getting it.

### 5. Include pumpkin in your diet

Pumpkin is another food that is rich in vitamin A and can help you get rid of tinnitus. Vitamin A is an important nutrient that ensures the proper functioning of the ears. Vitamin A deficiency has been linked to ear problems, tinnitus being one of them. Include pumpkin in your diet as much as possible for your ear health.

### 6. Consume ginger

Ginger has healing properties as it improves blood circulation. It is also a good antioxidant and reduces the inflammatory response and related symptoms such as pain, which is helpful in dealing with tinnitus. Grate

ginger and add it to a cup of hot water, steep, and strain to make ginger tea. Drink this tea at least twice a day for its benefits. Other than drinking ginger tea, you can also chew a few pieces of ginger every day.



### 7. Try Ginkgo biloba extract

Based on various research studies, the use of *Ginkgo biloba* extract has been deemed helpful in the treatment of tinnitus over placebo. The effectiveness of the ginkgo preparation depends upon its quality, the bioavailability of its active compounds, and the extraction process used to formulate the product. Although not all patients may benefit from this remedy, a considerable amount of improvement enough to enhance the quality of life of patients has been observed.

### 8. Take zinc supplements

Zinc is an important oligo element that plays a vital role in physiological functions including central neurotransmission. It acts as the first line of defense against free radical damage in the cochlea. Studies have shown that altered zinc physiology could be linked to tinnitus. Current evidence also reveals clinical improvement in cases of tinnitus with zinc supplementation.

Talk to your medical advisor about zinc supplementation if you suffer from tinnitus.



## 9. Consume apple cider vinegar



Apple cider vinegar has antifungal and anti-inflammatory properties because of which it can be used to treat infections that can be the underlying cause of tinnitus.

It is well known that apple cider vinegar has antifungal and anti-inflammatory properties, because of which it can be used to treat infections that can be the underlying cause of tinnitus. It also balances pH levels in the body. To consume apple cider vinegar, you can mix 2 teaspoons of it in a glass of water and drink it at least twice a day. The benefits of this remedy have been shared by professionals in the field from experience, but still more research on it is needed. So, look out for and report any side effects to your healthcare provider.

### N. Conclusion

With all above facts it can be concluded that unani system of medicine possesses quality approach towards alternative management of tinnitus with use of Ilaj-bil-Dawa (pharmacotherapy), Ilaj-bil-Ghiza (dietotherapy), Ilaj-bil- Tadabeer (regimental therapy) and Ilaj-bil-Yad (manual therapy/surgery). The efficacy of these drugs are validated by unani physician since thousands years. However all description and management mentioned in unani system of medicine has been included in this review. Because conventional treatment is not 100% effective, so unani treatment can be taken as alternative medicine, it will give better result in tinnitus.

### Discussion

Tinnitus is well described as Taneen wa Dawi in various unani classical literature. There are so many causes are responsible for tinnitus but most of the unani physicians clearly explain about diversion of ghaleez akhlat wa riyah (waste material) from the brain towards ear is a causative factors for tinnitus. Malnutrition, dryness, starvation and general weakness also predispose the tinnitus. Various treatment and procedures are described in unani for the management of tinnitus (taneen). On the basis of available literature unani physicians have described causes, pathophysiology, clinical features, diagnosis and treatment well. Unani scholar has



emphasized the management of tinnitus in different modalities i.e., Ilaj-bil-Dawa (pharmacotherapy), Ilaj-bil-Ghiza (dietotherapy), Ilaj-bil-Tadabeer (regimental therapy). As Ilaj-bil-Dawa (pharmacotherapy) Tanqiya-e-Dimagh and Islahe Meda wa Hazam drugs, Murattib Advia wa Aghzia, Muqawwi Aam (general tonic), Muqawwi Dimagh (brain tonic) advia (drugs) are beneficial in tinnitus. As Ilaj-bil-Ghiza (dietotherapy), Jaiyyad ul Kaimus (normal chyme), Lateef (tense diet) and Saree-ul-Hazm (fast appetizer) should use in this case. Most of the unani physician have recommended Inkabab, Pashwiya (Foot bath), Hijama (Cupping), Qutoor (drop) as Ilaj-bil-Tadabeer (regimental therapy) on the basis of what causes are responsible.

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