

*Conversations in Tinnitus*

With Bob DiSogra, PhD

Topic: Over-the-Counter Medications for Tinnitus Relief

Transcription:

- S1 00:00 Welcome to *Conversations in Tinnitus*, a podcast of the American Tinnitus Association. The American Tinnitus Association is a nonprofit organization dedicated to research, advocacy, education, and support for people who live with tinnitus. *Conversations in Tinnitus* podcast are an extension of ATA's magazine, *Tinnitus Today*, the only publication dedicated to educating the public and practitioners about ongoing research, treatments, and management of the condition.
- [music]
- S1 00:49 And welcome to another episode of *Conversations in Tinnitus*. As always, I'm John Coverstone. And over here is Dean Flyger. And joining us this time is an audiologist from New Jersey, Dr. Bob Disogra. He is an audiology consultant from Millstone, New Jersey; also adjunct faculty at Kean University in New Jersey; and a frequent lecturer in pharmacology and ototoxicity and nutraceuticals. Nutraceuticals, of course, are the focus of this conversation today. Looking at over-the-counter, or OTC, tinnitus relief products, which are also sometimes called nutraceuticals. And Dr. Disogra has already published a number of articles and papers, has some online resources. If you do want to follow-up on anything that we talk about, he can be reached at drbobdisogra.com that's D-R-B-O-B-D-I-S-O-G-R-A dot com. I'll try to give that again later in the podcast. But for starters, let me just welcome you to the podcast here. Thanks for joining us.
- S2 01:55 John, thanks for having me back. I appreciate it. Dean, good to see you.
- S1 01:57 So, we all, especially us audiologist, we've all seen all kinds of things advertised. I'm sure the vast majority of ATA members and other listeners of this podcast have seen things advertised in print, online, maybe seen things on the shelves in the store. Various products purporting to, pretending to give relief to tinnitus, but what's the real story behind those? Do any of these actually work?
- S2 02:30 The real story is – right out of the gate – is that the Food and Drug Administration has not approved any of these products for tinnitus relief. There are over 80 products on the market right now coming from all different parts of the world; mostly here in the United States. These are dietary supplements. Some having anywhere from three or four ingredients to over 35 ingredients. And my researcher has looked at each of the individual ingredients that are in these products and only about 10% of them have any published research on them. And even then, the research is really vague. There's loopholes in the law here that allow these manufacturers to make these claims for tinnitus relief without really out any-- The don't have to prove it. They don't have to have the double-blind studies.
- S2 03:26 All the technical things that go through with the pharmaceuticals to get FDA approval because the Food and Drug Administration classifies nutraceuticals, or dietary supplements, as food. And because it's food, there's loopholes. And you can say whatever you want about the product and you don't have to prove efficacy and safety. Whether it's effective or not. But as long as you put the disclaimer on the label

that says, "These statements have not been evaluated by the FDA, the Food and Drug Administration. This product--" I'm sorry, "These statements have not been evaluated by the FDA. This product is not intended to diagnose, treat, cure, prevent any disease." And sometimes you see that in super small print or you hear that with time-compressed speech at the end of the commercial on the radio, the television, whatever [laughter]. And if you miss it, you're going to miss it. It's an \$18, \$19, \$20 billion dollar a year industry. And again, the manufacturers can make these statements. And again, as long as they have that disclaimer on there, they are basically working within the laws.

S1 04:38

So, the law is one thing, but as we know as practitioners, any over-the-counter products like that that are not a classified drug like you said, they can say anything. They can have just about anything in them.

S3 04:51

Mm-hmm. That's right.

S1 04:51

If memory serves, there is at least one and maybe a couple tinnitus relief products that have quinine, I believe, in them. Isn't that correct?

S2 05:03

Yeah. There's several that have quinine. Some have ingredients that can be found in rat poison. Okay. And ceramic glazing. When I was doing this research several years ago, I was flabbergasted by just, "Are you kidding me?" It's just like, I don't believe this is in there. And again, these quantities are small amounts. But nonetheless, somebody is making a decision to put 25 mg of [inaudible] and ginseng root into your product for tinnitus. So, what I did is that I contacted that random 25 of these companies and I identified myself. I wasn't going to fool around, I identified myself. And I said, "I'm doing a research project and I need to know, who's on your board of directors? Or whose on your advisory board? Whose making the decisions to put these ingredients in? And can you show me some of the research that you have? Any longitudinal studies that says, 'Hey, this works!'" Okay. And only two companies got back to me. And one said they took their product off the market because they realized it didn't work. And the other one said they were just too busy to answer my questions. And the other three just never got back to me again.

S2 06:11

So, they're not serious. These companies, if it really worked, they would be advertising in our journals. They would be at our conferences, at our conventions in the exhibit hall putting out this information. Yeah, it's still kind of the Wild West a little bit out there. But again, it's a matter of recognizing that tinnitus is a symptom of a problem. Where, to the consumer, it's a complaint and what we need to do is to recognize that-- Let's look at the cause. And then once we establish a cause, we can develop a plan that may require either medical, sometimes surgical intervention. Or other types of technologies to help them. And also maybe some counseling that may be needed. Depending on the severity of the tinnitus and how the patient's reacting to it. So, the magic pill doesn't exist. Okay. And that's the important point that I'd like to make here. It does not exist. And you can spend up to \$30 a bottle for this stuff with no guarantee at all. And I've had patients come into the practice and they've even said, "Hey, I take this stuff and it works." And so on the inside, I'm saying, "I have no clue why it's working." But on the outside, I'm saying, "Well, I'm glad you found relief."

S2 07:30

But what happens is that I'm looking at the ingredients, there may be some ingredients that could be harmful to persons that are taking cardiac meds. Okay. And that's what my researchers identified, which of those ingredients or how many of them are out here that are in these products with no tinnitus-related research. Yet they're in there. And it's like, jeez, something can happen. And until something happens, they're still going to be able to do that. But there is a mechanism out there, the Food and Drug Administration has a mechanism to report an adverse reaction to a

dietary supplement. Okay. And it's the same program that you would report an adverse reaction to a pharmaceutical. And that is the MedWatch program. M-E-D-W-A-T-C-H and I think the 800 number is 1-800-MEDWATCH. It's by the FDA and this is the patient reporting process to report a pharmaceutical side effect or a nutraceutical, or dietary supplement, side effect. Okay.

- S1 08:34 So, the important message is, there's nothing proven to work. Nothings proven to work. We can't say that nothing will work because anybody who practices and provides tinnitus care knows that there's a very strong placebo effect to anything we do.
- S2 08:50 Absolutely.
- S1 08:50 And it's a huge topic of debate in research in this area because it's really a difficult thing for us to control in a research study. And so, there are some tinnitus relief products, nutraceuticals, that have shown that there's a benefit. But what they can't show is there's a benefit more than a placebo. And that's what they're not able to show.
- S2 09:13 This is true. Yeah. And most of the products that I've seen are just multivitamins. And they're just megavitamins. There was one product that I saw that had over 16,000% of the minimal daily requirement that's set by U.S. Pharmacopeia.
- S1 09:32 Wow.
- S2 09:32 Like, why 16,000% [laughter]? Whatever your body doesn't need--
- S1 09:37 Wow.
- S2 09:37 --you're going to get rid of naturally within 24 hours. Okay. But why 16,000% in combination with other vitamins. And that's where the problem is. The individual mineral or vitamin might be somewhat effective in some cases, but in combination with others, it might not be. And this is where you need to put the research. This is where the money has to go. And this is where, who's going to put this money up for this type of research, which can take years to accomplish. And they're not. So, because dietary supplements are considered food by the FDA, they can put that product out there, they can say what they want about it. They can even say that it's FDA approved, but it's FDA approved for the sale. It's not approved for the tinnitus. Okay.
- S1 10:29 Mm-hmm. That's right.
- S2 10:30 And they may say it's FDA registered. Which means that, yeah, okay. You've got to register your company to the FDA to sell a product. But you see these loopholes in the language, that's what really confuses the consumer. And they're going to depart with some serious money and with no guarantees. And my message out there to everybody – don't read the label, don't even pick it up.
- S1 10:51 Sure. Absolutely.
- S3 10:52 Right. Right.
- S1 10:53 Yeah. Stay away.
- S3 10:55 Yeah. It's a buyer beware with a lot of these things. We live in such a regulated condition with being audiologists and doing everything related to the betterment of the patient. It's really hard to swallow when somebody comes in with a bottle of pills that claim to do something that have nothing that can do any more effectiveness than a sugar pill. It's very frustrating.

- S2 11:22 Yeah. It is very frustrating. Because like I said, they can spend up to \$30, \$40 dollars a bottle. And the manufacturers always recommend a three-month supply [laughter]. So, right out of the gate you can run into some trouble with that. Now there have been situations where people have taken these products and developed side effects because of the other ingredients or they have another medical condition going on.
- S1 11:46 Sure.
- S2 11:46 This is self-medicating in a lot of ways. And we all know the horrors of self-medicating. And gosh, I just wish people would just talk to your audiologist, talk to your family doctor. Just learn more about these products and learn about why your ears are ringing. And of course, your pharmacist becomes your best friend here. Because they are a wonderful goldmine of information about these medications that they're selling in their stores, in addition to the pharmaceuticals that they have also. So, again here, just always keep in your mind, tinnitus is a symptom to us as audiologists. But to the consumer, it's a problem. And we understand that. And we appreciate that. And we have a lot of knowledge at our fingertips that we can put out there. And again, these over-the-counter supplements are just not high on the list of what we would recommend.
- S1 12:48 The more broad message there too is that it doesn't matter what you're taking. If you're going to start taking vitamin C on your own, you should go talk to your physician about that and/or your pharmacist. Because any over-the-counter drug/relief product/vitamin that you take may have interactions with something you're already taking. So, if you're on any prescription medication, even if what your taking seems to be very benign, it's worth making that mention to your physician or your pharmacist and making sure that it's okay.
- S2 13:25 Yeah. There was a study done years ago that 80% of people who take a dietary supplement do not tell their primary care physician that they're taking the dietary supplement, number one. And of those 80%, 30% of them are taking a dietary supplement for a condition that they're already taking a pharmaceutical for. Okay. And again, you have a drug, nutraceutical interaction that could occur. And these people are getting sick and they're blaming something for it. It's a matter of just having a better dialogue with your primary care doctor. And again, it's the primary care doctor's responsibility to listen to these patients to see what's at their fingertips. And to say, "No, don't do that." And audiology is there because clearly, it's ear related issue. And obviously, our profession being the experts in hearing and hearing and understanding and balance, we certainly have resources that we can counsel our patients to say, "Hey, this is a multivitamin. There's no scientific proof on here. And if you have relief, then I'm glad you found relief." If you're going to ask me why I found relief, I guess I can't answer that. I don't have those answers [laughter]. I scratch my head and say, "Good luck."
- S1 14:46 Yup.
- S2 14:47 But I will counsel the patient about the other medications that they're taking, especially if they're cardiac patients or if they're pregnant. Okay. Or if they're kids, there are some tinnitus products out there for children. And it's like, stay away from this stuff. Talk to your pediatrician. Okay. Remember tinnitus is the symptom. It's a problem for the listener, but it's a symptom to us and let's go to that cause. Let's find out why.
- S1 15:11 Yeah. And I'm wondering, do you know of any resources where someone can go and find more information about some of these things? If they did want to look it up or research further?

- S2 15:23 For the nutraceuticals, the National Library of Medicine has an office of dietary supplements. Okay. You can just type it in your browser, Office of Dietary Supplements, or FDA National Library of Medicine. And in there, they have a list of these products. You also have a "contact us" tab, where you can actually inquire. Say that I have a concern. And those are great words. Okay. I learned that from a social worker a long time ago – "I have a concern." Boy, you get people to sit up in their chairs when you say that [laughter]. I had a neuro-radiologist re-read an MRI for me because I had a concern about his report. And he did it and it was great. Again, your concern is legitimate. And again, the Office of Dietary Supplements at the National Institutes of Health. Okay. Not the National Library of Medicine. The National Institutes of Health, N-I-H dot gov has this office. And they'll answer any inquiry that you have. These are your tax dollars at work. It's out there. And it's a good resource for consumers. And for audiologists.
- S1 16:40 I don't know if there's much more to say about this, to be honest.
- S3 16:43 Nope. We answered the question right out of the gate [laughter].
- S2 16:47 I think the message that I want to put out to consumers is that just remember that your tinnitus is a symptom. Something's causing that. Let's top down. Let's find out medically what's going on. Audiologically, let's see what we can do here. I would not recommend self-medicating on these over-the-counter products. The labels are slick. The advertising is slick. There is no cure for tinnitus that I know of. I think if there was a cure for tinnitus, it would be the lead story on the evening news.
- S1 17:16 Exactly.
- S2 17:16 Because more people have tinnitus than diabetes. And more people have tinnitus than hearing loss. If something was there and it worked, it would be a lead story. But right now, John and Dean, this is something that we have to advise our patients and our listeners to take it to the-- Go top down. Okay. Take it to the physician, your family doctor, the ENT. And if they say there's nothing that can be done. Technically, I understand, medically there might be not anything that can be done. But then you talk to the audiologist and you listen to what can be done. Okay. And I think that's the next step. So, just because you've been told there's nothing that can be done, you have to live with it, doesn't mean it's a death sentence. It doesn't mean that there is no help. Yes, there is help in various forms. Some help will actually help tinnitus subside. Others will just have to work you around with counseling for the tinnitus. I've had patients say they're suicidal because of their tinnitus. So, I can only imagine what that must be like. So, there are resources out there. Popping a pill over-the-counter without any type of medical management, audiological management is not good practice at all. And I would discourage it.
- S1 18:37 And I know there are people that are going to listen to this because I know there are people out there who are going to say, "Oh, but I took this product and I got relief from it." And just to underscore that idea, we're not saying that you're not going to get relief if you take the product. We're just saying it probably isn't because of the product.
- S2 18:59 Might be.
- S1 18:59 And there may be other reasons for that, other than that. Just because you're out there and saying, "Oh, I took this product and I got relief from it. It must work." Sometimes you're making a correlation that actually doesn't exist.
- S2 19:14 Yeah. And again, if they went to any of the websites to look up the ingredients. PubMed, P-U-B-M-E-D, PubMed, all you have to do is just type in the ingredient into the search and then type the word tinnitus right after it. And you can take a look at

the National Library of Medicine's database of millions of articles about whatever you type in. And you'll find out that most of them will come up with no articles found. In a multi-million article database, you type in a product and the word tinnitus right after that. And you'll be very surprised to see what does show up because there won't be much at all. I did that work already. I had that published. So, it's just a matter of letting consumers know that there are better ways to manage your tinnitus other than self-medicating with something over-the-counter.

S3 20:11 So, just a little sideline, what got you started on this subject? What peaked your interest to start down this path that, I have to admit is, it seems like a no-brainer. But it's really very unique. You're kind of the first that went down this area. So, how did you get interested?

S2 20:32 One day, in my office, I got a box of over-the-counter, tinnitus relief products. A box of pills in the mail with a dozen bottles of 30 pills per bottle. And there was an information sheet in there about this product and its efficacy for tinnitus. And my wife has mild hearing loss. She wears hearing aids and has had some tinnitus. So, I brought this home. I just said like, "Hey, this is a dietary supplement, why don't you try it? One pill breakfast, lunch, and supper. Three times a day." Now my wife's a little more conservative than I am. And she says, "Well, let me try one a day and see what happens." So, nothing changed in her diet. Nothing changed in anything in her life except she added this pill for tinnitus relief, as it was marketed, once a day. Two months later, she develops kidney stones. Okay, where did that come from? So, of course, we're looking at all the reasons, which nothing changed in her diet enough. It's like, what's going on here? So, I started to look back at what was new and what was new was this introduction of this product. So, I was looking at the ingredients and I went online and I started looking at these ingredients. And I started scratching my head because there was nothing in these ingredients that were specifically geared for tinnitus. And then I looked at the information sheet that came with the product and most of the research was from the 1960s. It was 50-year-old research that they were touting. And I said, "There's got to be something deeper here."

S2 22:09 And fortunately, she passed her last kidney stone the day before her surgery, which was terribly embarrassing and totally-- I felt so guilty here, this is my wife. And what happened is that we looked at the products and then all of sudden I started doing searches, Amazon searches. And all of these products started showing up. And then I was starting to look at the ingredients and one thing led to another. And then there were over 80 products combined, over 250 ingredients, and less than 10% of them had research about the ingredients relative for tinnitus. And the other stuff was just like, multivitamins and then I was like, "Why is it even in there?" And that's when I wrote the letter to these companies and said, "Who advised you to do this?" And nobody got back to me. So, it was like, "Okay." So, I just started doing it on my own. So, basically, it was a personal issue that happened with my wife. And in good faith, with something that came unannounced, unsolicited in my mail one day. And my wife still loves me.

S1 23:09 So, there's--

S2 23:10 She still loves me. But just [laughter] she doesn't take--

S1 23:13 Something I've given you.

S2 23:15 I've been forgiven many times. I still plead [laughter].

S1 23:18 It's forgiveness. It's an ongoing thing in a marriage, yes. You know, I did just a little fun research online. I just did a quick search. And I wanted to see what came up. And these things we're talking about, it reminded me, they're not all a bottle of pills. There

are various things. Some are ear drops. Some are liquid. Some are pills. There's a patch out there. There's a tinnitus patch.

S2 23:45 Yes. There's a couple of patches. A couple patches.

S1 23:45 Not exactly sure where you wear them, but there is a patch out there. But something that I found was interesting, there's one in particular that I found here. And it mentions a bunch of ingredients that I frankly, probably can't pronounce and won't try. But then it mentioned that the active ingredients of this product are officially monographed in the Homeopathic Pharmacopoeia of the United States.

S2 24:14 Okay.

S1 24:14 So.

S3 24:15 Next. And what is that [laughter]? What does it mean?

S2 24:21 Homeopathy, you get the home remedies, folklore. Gosh, that's a whole different area altogether. Years ago, people used to blow cigar smoke in people's ears to cure otitis media for outer ear infections and stuff. You get this out there. It's not just oral stuff, there are sprays, there are drops in the ear. There's something called skull thumping. Okay. Which you actually take your knuckle and you can bang on your [laughter] mastoid bone for 30, 50 times. And allegedly it's supposed to stop that. There's vibratory devices that come out from South America. There's one that comes in from Israel. Not Israel. There's another one in the United States. There's infrared devices that are out there. Laser lights that are out there.

S1 25:12 Yeah. A lot of laser lights. Yeah.

S2 25:13 There's a variety of different pro-- Yeah. And the research shows that laser light, it's short-term relief. But again, it's relief. And I guess when someone's looking for the big "R" word as opposed to the cure word, relief is better than nothing. But again, these products come with a price. And again, the relief might be short-term. But again, what's causing the problem? Okay. And I think that's the point that I'd like to make here. It's just, let's find out why. Okay. Let's find out why. And then the products, gosh, if they were that good, every audiologist would recommend it. Because there are thousands of audiologists out there that see thousands of patients with tinnitus. We'd love to get something for you. But right now, we're not there yet.

S3 26:00 Well, and frankly, they're pandering to a group of people that frankly, have a little bit of desperation too at times. And it's amazing how we become vulnerable to suggestion when we have a sense of urgency. Sometimes we don't necessarily do the rational thing.

S2 26:20 Yeah. And again, unless you have tinnitus. The closest I came, I went to a rock concert without my hearing protection because I knew my seats were lousy. And I feel like, "Okay, I won't get my ear protection." It was like four days after the concert that the noise stopped. And it wasn't ringing. It was sounds I had never heard before. And it really scared the heck out of me because it's like, "Gee, did I just become my own patient? Could I live with this?" I mean, I wasn't sleeping. And it's only for four days. Okay. And thank God for me, it went away. But nonetheless, it was still-- It scared me. It really did. So, I can empathize with my patients and-- But again, I encourage them more to wear hearing protection at concerts. To look at the side effects of the medications that they're taking for another medical problem. And again, talk to your audiologist. Talk to your primary care doctor, ENT physician. There may not be a magic pill. But some docs will just say, "Hey, just try it." Well, at \$30 bucks a bottle, no I'm not going to just try it. I want a little more guarantee than that. And I think consumers should be a little bit more aggressive in their advocacy for their tinnitus.

Rather than to just say, "Well, I'm not going to live with it. There's got to be something else going on." And there is, which is encouraging.

S1 27:40

And so, on that note, we have been talking with Dr. Bob Disogra, who is an audiology consultant from Millstone, New Jersey, as well as adjunct faculty at Kean University in New Jersey, and a frequent lecturer on pharmacology, ototoxicity, and nutraceuticals. And you can find more about him and his work at drbobdisogra, D-R-B-O-B-D-I-S-O-G-R-A dot com. And thanks for joining us on this first half of our chat. We'll be bringing you back for the next podcast conversations in tinnitus to talk a bit more about ototoxicity.

S2 28:18

Thank you, John, for having me. Dean, it's great to see you. Thanks again.

[music]

S1 28:35

The American Tinnitus Association is a nonprofit organization dedicated to research, advocacy, education, and support for people who live with tinnitus. Gifts and donations to ATA are used to support research for a cure and other critical missions described on our website at [www.ata.org](http://www.ata.org).