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Lifestyle > Wellness

What’s That Weird Ringing in Your Ear? It Might Be Menopause

We had an expert unpack this surprising, buzzworthy symptom.

By Lisa Arbetter Published: Dec 10, 2025 2:17 PM EST

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Sure, we know that menopause is behind night sweats and hot flashes, but is it to blame for everything that goes awry when you're over a certain age? In this series, we're unpacking some of the funkiest health woes people encounter in midlife to see which can be chalked up to The Change, and which are...well, just a you thing.

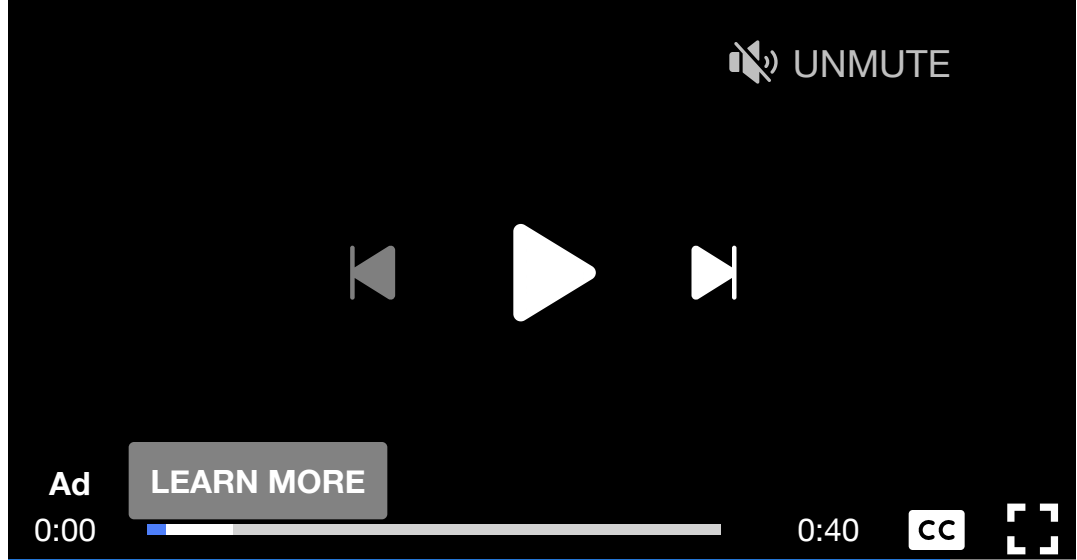
Just when you thought perimenopause couldn't make you feel any more unhinged, you start hearing things. A ringing, a hum, a buzz, maybe even a whoosh. Whatever the sound, it hijacks your focus, messes with your sleep, and makes you wonder: *Have I finally lost it?!*

You haven't. But you may have tinnitus: hearing a sound that has no external source. While there are multiple kinds of tinnitus, "for most people, it is a symptom of changes to the hearing system itself," says **Craig Kasper**, AuD, an audiologist who specializes in tinnitus.



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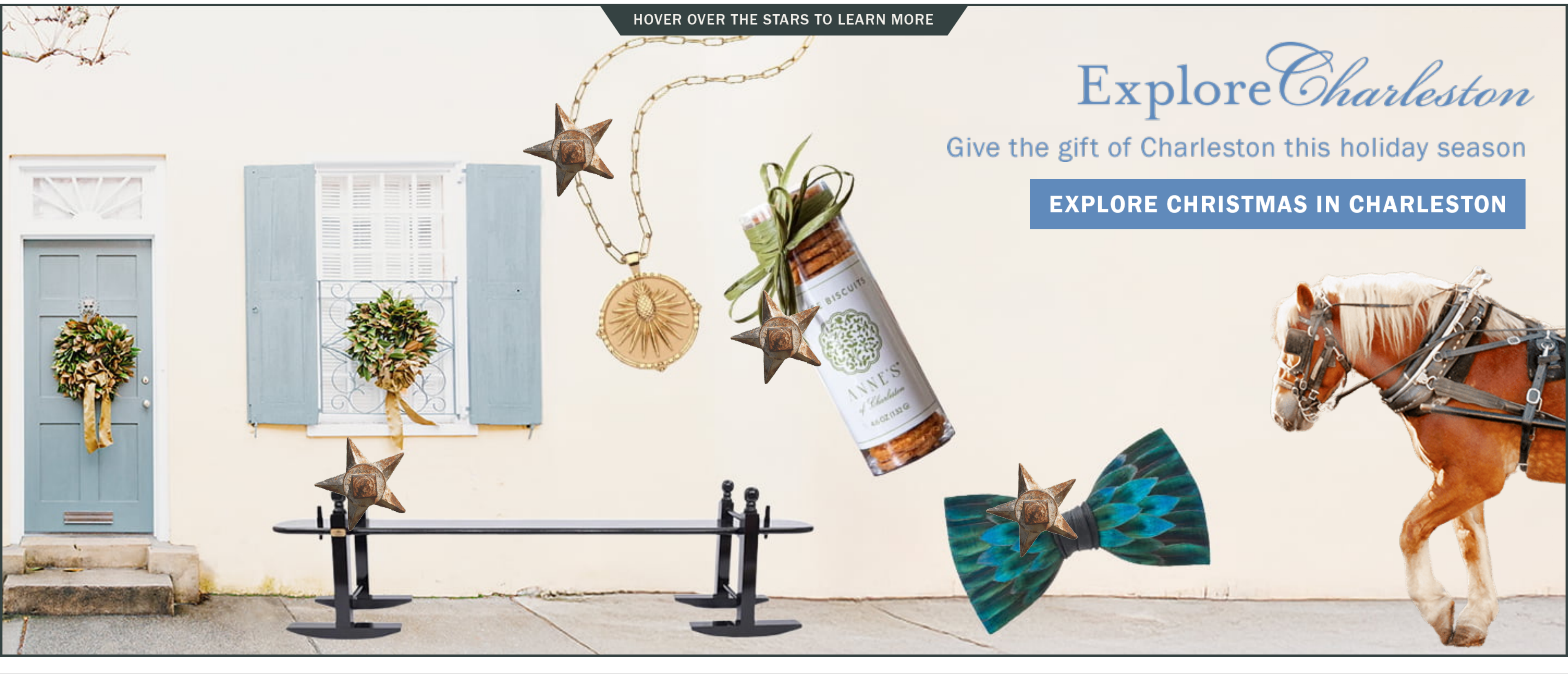


Anyone else hearing that?

Here's what's happening: Over time, the tiny hair cells in your inner ear can be damaged by everything from aging and medications to years of loud music (say, blasting *Jagged Little Pill* in your Walkman). When these cells can't send clear signals, your brain starts searching for sound—and, not finding it, creates its own.

For most, the brain is able to naturally filter out this phantom sound, allowing it to fade into the background unnoticed. But for others, it gets pushed into the spotlight by a stressful event or a major life change. "The limbic system, which governs emotion, suddenly pays attention and flags the sound as a possible threat," explains Kasper. That's when the vicious loop begins: Stress fuels perception, perception fuels stress, sleep suffers, and the sound seems to grow louder.

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Hormonal shifts can also be a trigger. "Estrogen and progesterone are thought to have neuroprotective effects," Kasper says. Without them, your brain becomes more reactive. Also, when hormone levels swing or drop, many women see sleep and stress changes that can exacerbate tinnitus.

Turn down that racket!

While tinnitus isn't always curable, it's highly treatable. Start with the basics: consistent sleep, moderate exercise (think walks or yoga, not marathons), and long-exhale breathing to calm your nervous system.

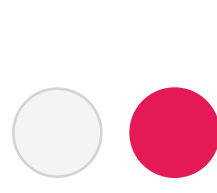
If you have **hearing loss**, hearing aids can improve the sound input the brain is missing. And nutritional factors may matter, too. Vitamin D deficiency, for example, has been linked to worse tinnitus, but the evidence for treatment with supplements is still limited and mixed. Talk to your doctor or an audiologist for specific recommendations.

Depending on your tinnitus's cause and severity, your doctor may suggest one or more of these evidence-based options:

- **Cognitive behavioral therapy (CBT):** The gold standard for breaking the attention-anxiety-tinnitus loop.
- **Lenire device:** An FDA-approved device pairing sound with gentle electrical stimulation on the tongue. It changes the way the brain handles phantom sounds by providing stimuli to the ear and tongue at the same time and has **been shown to reduce symptoms** and "help patients habituate to their tinnitus," Kasper says.
- **Tinnitus retraining therapy (TRT):** A longer-term approach (12 to 18 months) that helps many people adapt by using a combo of counseling and sound therapy.

With the right treatment, "most people can habituate to the point where they're barely aware of it," Kasper says. In other words, your brain can learn to treat tinnitus the way you might treat a man on the street telling you to smile—it'll just tune it out.

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