

The Effects of Cranial Manual Therapy and Myofascial Release Technique on Somatic Tinnitus in Individuals without Otic Pathology: Two Case Reports with one year follow up.

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BACKGROUND Tinnitus is defined as hearing a sound in the absence of any external auditory stimulus. Somatic or craniocervical tinnitus, which is present in patients without any detectable ear/nerve disorders, is associated with somatic disorders such as myofascial pain syndrome, or cervical and cranial dysfunctions. Craniosacral manual techniques for correcting cranial bone dysfunctions and myofascial release for myofascial pain could improve somatic tinnitus [1].

PURPOSE The purpose of this report is to present the effect of cranial manual therapy and myofascial release technique on somatic tinnitus in two case reports with one year follow up.

METHODS Two cases were suffering from chronic tinnitus without any otic pathology. Both subjects had marked sphenoid, temporal and occipital bone dysfunctions. Intra-oral palpation and examination revealed presence of active tender point in the lateral pterygoid muscle in two cases. Applying mechanical pressure to the palpated trigger points increased tinnitus in the ear and reproduced his headache and caused radiating pain to the temporal bone. Manual therapy of the cranial bones for restoring their normal alignment and cranial rhythm was performed for both subjects. The tender points on the lateral pterygoid muscles were treated through intra-oral neuromuscular technique (myofascial release) as described by Chaitow [2].

RESULTS The tinnitus severity assessed by the Tinnitus Severity Index on a 1 – 100 VAS scale. After one-year follow up, quality of life, social interactions and tinnitus symptoms were also assessed. Manual therapy of the cranial bones for restoring their normal alignment, cranial rhythm and tension membrane and myofascial release technique for tender points in lateral pterygoid muscle had a significant effect on reducing the persistent tinnitus in both subjects. At one-year follow up, both subjects reported significant improvement in their quality of life and social interactions without recurrence of their tinnitus symptoms.

CONCLUSION The findings of this study indicate that cranial manual therapy and myofascial release technique could be a potential treatment for somatic tinnitus in patients with no otic pathology or temporomandibular disorders.

REFERENCE

- [1] Chaitow L. Cranial manipulation theory and practice: osseous and soft tissue approaches, 2nd ed. London: Elsevier Churchill Livingstone; 2005
- [2] Chaitow L, Delany JW. Clinical application of neuromuscular techniques. Churchill Livingstone, China, 2002.

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