

It's the most wonderful tube of the year!

by Peter Karampekis, MD, photos provided by Pediatric Ear, Nose, and Throat Specialists

Being a parent is tough. Being a parent with a child that gets multiple ear infections or an ear infection that just won't clear is even more difficult. Middle ear infections (otitis media) are the second most common illness diagnosed in children by health care professionals. These infections occur when fluid gets trapped behind the ear drum and then bacteria overgrows. Your child may experience multiple symptoms, such as pulling on his/her ears, fever, irritability, pain, ear drainage and hearing loss. Your pediatrician is skilled at detecting these infections and will often prescribe antibiotics to help treat the infection. Seems simple enough--unless the infection doesn't go away or comes back again and again. Sound familiar?

Children 7 years of age and younger are at particularly increased risk of middle ear infections due to their immature immune systems and poor function of the eustachian tube (a small tube that drains the middle ear space to the back of the nose). Additionally, if ear infections persist over a long time, permanent hearing loss, speech delay, scarring and harmful effects of multiple and prolonged use of antibiotics may occur. It is always important to address an ear infection and ensure that it is resolved to avoid these long-term complications.

ANOTHER ROUND OF ANTIBIOTICS? THERE HAS TO BE SOMETHING ELSE TO DO...

Good news! There is. When a child has a hard time clearing an infection (or remaining fluid behind the ear drum) or continues to get multiple ear infections throughout the year, it may be time to consider ear tubes. The American Academy of Otolaryngology-Head and Neck Surgery Foundation recommends consideration of placement of ear tubes in children that have three or more ear infections in six months or four or more ear infections in one year. Additionally, ear tubes should be considered in children with fluid behind the ear drum that has persisted for three months or longer.

WHAT ARE EAR TUBES?

Ear tubes are tiny cylinders (about 3 mm) that are placed by an ear, nose and throat surgeon in the child's ear drum to allow fluid to escape from the space behind the ear drum into the ear canal. Additionally, this allows antibiotic ear drops to be placed into the ear canal and treat the ear infection in a much more effective manner than antibiotics taken by mouth. The tubes last for about 1-3 years and usually fall out on their own.

HOW ARE EAR TUBES PLACED?

Children need brief anesthesia for less than 10 minutes for ear tube placement. No breathing tube is required. Sedation is essential to ensure the safety of the child during the procedure. A tiny incision is made in the ear drum, the fluid behind the ear drum is suctioned, and the small ear tube is placed. The child is often back to normal by the end of the day.

HOW CAN I LEARN MORE?

Don't fear the ear! We can help you! Research shows that placement of ear tubes significantly improves hearing, reduces the frequency of fluid and infection behind the ear drum, provides a way for drainage of the fluid and application of antibiotic drops and improves the quality of life of children with recurring or persistent ear infections.

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A small incision is made in the tympanic membrane



Tube inserted to drain fluid