## GERARD FOGARTY F.R.A.C.S ELIZA TWEDDLE F.R.A.C.S

EAR, NOSE AND THROAT, HEAD AND NECK SURGEONS

# Glue Ear

Most children will have an occasional ear infection which will get better quickly and are not usually serious. A number of children who have recurrent ear infections will develop otitis media or 'glue ear'. Glue ear is when children have sticky fluid in their middle ear behind the ear drum. This may last for many weeks or months. It often follows one or more middle ear infections, although it sometimes happens when there does not seem to have been an infection. The fluid in the middle ear makes it harder for your child to hear. When this lasts for a long time hearing and speech development may be affected. Glue ear will usually become less common as your child gets older.

## Signs & Symptoms:

Many children with glue ear do not have any symptoms.

Some children have problems hearing, they may want to have things repeated, talk loudly or have the television up loud. Parents or teachers may notice this, especially in noisy situations such as classrooms.

Your child may have some pressure or pain in the ear from time to time.

In smaller children, hearing difficulties may affect their speech development.

Some children seen to be more irritable and have problems sleeping when they have fluid in the middle ear.

A few children with glue ear seem to have problems with balance.

#### **Treatment:**

You should take your child to visit a paediatrician (children's doctor) or Ear, Nose and Throat (ENT) specialist if:

Your child is having frequent ear infections.

Your child has persistent fluid in the middle ear that affects their hearing.

At this visit the doctor will discuss the following treatment options for your child.

#### No treatment:

If your child in not bothered by the fluid often no treatment is needed.

## **Antibiotics:**

A 2-3 week course of antibiotics is sometimes prescribed to kill any remaining germs. This may help the fluid clear.

### **Surgery:**

If the fluid still persists and is affecting your child's hearing over many months, a brief operation may be suggested. Small ventilation tubes (called grommets) are put into your child's ear. These tubes help fluid drain from the middle ear.

Your child's hearing must also be tested properly by a hearing specialist called and audiologist.

#### Care at Home:

Always try not to smoke in the home or around your child. Any cigarette smoke that your child breathes harms the Eustachian tube in the ear so the fluid cannot drain away.

Using dummies for long periods can also make things worse, so only use them for settling your baby.

If your child complains of pain you may need to give them some pain relief, such as Panadol.

