

Doc Talk

By Dr. Veronica Naudin



Ear Infections

Q: My son has had four ear infections. Is it time to see a specialist?

A: Ear infections are very common in childhood. In fact, three out of four children will experience at least one ear infection before they are three years old. This common problem accounts for many pediatric office visits annually. Ear infections are usually painful so parents are often quick to get the problem resolved. Your question, however, addresses the concern that many parents have after several ear infections. Specifically, how do I know if my son will have permanent damage from his infections?

There are several types of infections. The most common is acute otitis media or the middle ear infection. It usually involves having mucus trapped in the middle ear. It is usually painful and often is accompanied by fever. The second type is acute otitis media with effusion. This means that fluid and mucus are trapped in the middle ear. This type of otitis media seems to make it harder for children to fight a new infection. It may also make it more difficult to hear well. Hence, it is the complication of ear infections with persistent fluid build up that help determine a child's risk of speech problems.

Your pediatrician will diagnose an ear infection by looking at the tympanic membrane. He may puff a small amount of air into the ear canal to see if your child's tympanic membrane moves. Although there are now machines you can purchase to help you decide if your child may have an ear infection, your pediatrician is the most qualified individual to help you diagnose your child's middle ear infection.

After diagnosis, your physician will prescribe an antibiotic regimen. It generally will consist of taking antibiotics for 10 days. If your child is doing well after the course of antibiotics, it may not be necessary to see your physician for a follow up visit. However, if your child has had several infections, or if your child does not seem back to his baseline, it may be a good idea to see your doctor. Most children respond well to the antibiotics.

Occasionally, we see infants and children who have a more difficult time resolving their ear infections. It seems almost immediately following the completion of antibiotics, these children are back in the office with another one. When this cycle repeats itself three or four times and the physicians have used many different classes of antibiotics, it is probably time to see the specialist. However, it is impor-

tant that your pediatrician try to match the antibiotic with the infection as each antibiotic treats different classes of bacterial infections with different effectiveness.

When the medical management fails, your physician will likely send your child to have a hearing test and to see the otolaryngologist, (ear, nose, throat surgeon). Medical management is only failing if your child is having chronic or persistent ear infections. If a child has an ear infection that gets better and then has another ear infection in three months and gets better on antibiotics, this child is responding well to antibiotics and will not require a specialist visit. It is for the children who have chronic ear infections or persistent ear infections with fluids or effusion that we have some concern that hearing may be affected. If your child has had chronic ear infections and fluids from an ear infection have been present for several months, the otolaryngologist will help to determine if your child needs a surgical procedure.

The surgical procedure most often recommended is insertion of myringotomy tubes. The operation is common and safe but does require a skilled surgeon and pediatric anesthesia. The myringotomy tube is inserted in a small slit that the surgeon makes in the eardrum. The tube works to relieve pressure in the clogged ear so that the child can hear again. Fluid can not build up in the ear if the tube is venting it with fresh air. After several months to a year, the tubes usually fall out.

In summary, ear infections are usually easily treated. However, when the ear infection persists and there is evidence of fluid accumulation in the ear, your pediatrician will want to manage your child's infections more aggressively with stronger antibiotics. When this approach fails, it may be time to see the specialist. Of course, if you have concerns about your child and his hearing, consult your pediatrician immediately.

**Doc Talk is sponsored by
Pediatric PCAMG in Vista**

Please send questions and/or suggestions to:

Doc Talk, c/o PPCAMG,
2067 Vista Way #180, Vista, CA 92083
or call: (760) 945-3434 or fax: (760) 945-6761