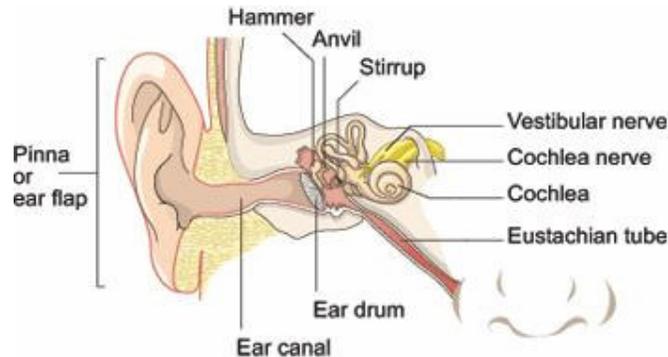


EAR INFECTIONS



What is an ear infection? Ear infections are common among children but at any age otherwise, it can happen. Ear infections generally happen when germs such as bacteria, viruses or fungi cause swelling and irritation in the ear. An ear infection means that the middle ear is infected. The middle ear is the eardrum and the small space behind the eardrum. In medical terms, an ear infection is sometimes called 'acute otitis media' and infections of the outer ear are called otitis externa.

Ear infections can be uncomfortable but are not usually serious. Sometimes, fluid build up behind the eardrum can cause so much pressure on the membrane that a hole forms (perforated eardrum). These usually heal by themselves. Occasionally an ear infection can lead to complications such as infection of the bone by the ear, and in rare cases meningitis (swelling of the brain) may develop. Ear infections are unlikely to cause permanent loss or impairment of hearing, but you may be referred to an Ear, Nose and Throat (ENT) specialist if the infections keep coming back.

Causes of ear infection : Outer ear infections can spread from general skin infections, or might just happen on your ear. They can be caused by:

- viruses like herpes,
- bacteria such as Staphylococci, or
- fungi such as candida, which causes thrush.
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Infections often get into the outer ear because of scratching the skin. You might scratch the skin because it is itchy due to eczema or psoriasis inside the ear. You might also damage skin and allow infection to enter if you put objects such as cotton buds or pencils in your ear to try to get rid of earwax. This infection is sometimes called swimmer's ear, because it can be caught though infected or polluted water getting into the ear.

Inner ear infections are often caused by the common cold, which spreads through the tube that connects your ears and nose (the Eustachian tube). The small space behind the eardrum in the middle ear is normally filled with air. It is connected to the back of the throat by a tiny channel called the Eustachian tube.

They can also be caused by common childhood illnesses such as measles, or by getting water in your ear when you have a burst eardrum. The middle ear space sometimes becomes

filled with mucus (fluid), often during a 'cold'. The mucus may then become infected by bacteria or viruses. Children with glue ear who have mucus behind their eardrum are more prone to ear infections. Sometimes an ear infection occurs 'out of the blue' for no apparent reason.

Symptoms of an ear infection :

- Dulled hearing may develop for a few days.
- Fever (high temperature) is common.
- Children may feel sick or vomit, and can be generally unwell.
- Young babies cannot point to their pain. One of the causes of a hot, irritable, crying baby is an ear infection.
- Sometimes the eardrum perforates (bursts). This lets out infected mucus and the ear becomes runny for a few days. As the pain of earache is due to a tense eardrum, a burst eardrum often relieves the pain. A perforated eardrum usually heals quickly after the infection clears.
- Symptoms of an outer ear infection include swelling, itching, and sometimes you might have fluid or yellow/green pus coming out of your ear. Infections of the outer ear don't usually affect your hearing.
- In a middle ear infection, the space behind your eardrum gets filled up with fluid or mucus, and gets infected. It can cause earache, high temperature, slight deafness, and children often feel tired or sick. Sometimes the eardrum bursts and fluid comes out of your ear.
- If your baby or child appears tired and lethargic, or has other symptoms that you are worried about, you should take them to see your GP immediately

The treatment for an ear infection? : The treatment for ear infections depends on the cause. Most middle ear infections clear up without treatment in about 3 days. Nose drops, bought over the counter, can help to reduce any swelling inside the nose and Eustachian tubes (caused by the common cold), & ease the pressure on the ear.



Outer ear infections might be treated with lotions, creams, or ear-drops containing anti-bacterial, anti-fungal, or moisturising ingredients. These can be applied inside your ear canal on a special piece of gauze. You might also be given corticosteroid cream to reduce swelling and redness inside the ear. You should never put anything, including creams and lotions, inside your ear until you have discussed it with your pharmacist or GP.

Painkillers : If the ear infection is causing pain then give painkillers to children regularly until the pain eases. For example, paracetamol (Calpol, Disprol, etc) or ibuprofen. These drugs will also lower a raised temperature which can make a child feel better. If antibiotics are prescribed (see below), you should still give the painkiller as well until the pain eases.

Children who keep getting ear infections might have tiny tubes called grommets put into their eardrums, to help fluid drain out of the ear. This is a common operation that usually takes about 20 minutes under a general anaesthetic.

Antibiotics : are prescribed in some cases only. Antibiotics are not advised in most cases. This is because in most cases the infection clears within 2-3 days on its own. Also, it is best not to take antibiotics unless needed as side-effects such as diarrhoea can sometimes be a problem. Antibiotics are more likely to be prescribed if:

- The child is under two years old (as the risk of complications is greater in babies).
- The infection is severe.
- The infection is not settling within 2-3 days.
- Complications develop.

You might have to take antibiotics if it's a bacterial infection, but it is often hard for doctors to tell the difference between viral and bacterial infections - if it is a viral infection, antibiotics will not work.



Prevention is better than cure: You may be able to prevent your child from getting middle ear infections by:

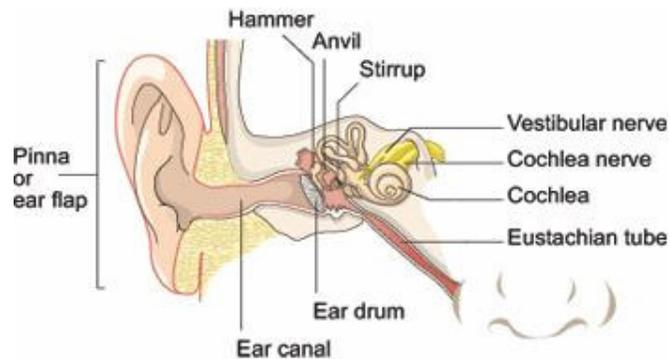
- Not smoking. Ear infections are more common in children who are around cigarette smoke in the home. Even fumes from tobacco smoke on your hair and clothes can affect the child.
- Breast-feeding your baby. There is some evidence that breast-feeding helps reduce the risk of ear infections, especially if ear infections run in your family. If you bottle-feed your baby, don't let your baby drink a bottle while he or she is lying down.
- Washing your hands often. Hand-washing stops infection from spreading by killing germs.
- Having your child immunized.. Current immunizations don't specifically prevent ear infections. However, they can prevent illnesses, such as Haemophilus Influenza and influenza (flu) that often lead to ear infections. Have your child immunized at the ages suggested by national guidelines. Having your child immunized with Pevnar vaccine may help reduce the risk of ear infection.
- Taking your child to a smaller child care center. Fewer children means less contact with bacteria and viruses. Children can pick up antibiotic-resistant strains of bacteria from other children in child care settings.
- Not using a pacifier. Try to wean your child from his or her pacifier before about 6 months of age. Babies who use pacifiers after 12 months of age are more likely to develop ear infections.



Ear infections are not generally serious but as I always say, no disease should be taken lightly. If the symptoms persist for over 2 – 3 days, the pain continues, whether it is with the children or adults, must consult your physician or an ENT specialist. But be extra careful about the babies as they can not speak and tell us about their problem.

(Reference : Patient UK / NHS Direct / Dr. L. Rehman)

Dr. A. Kumar
Consultant



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