
Ear problems in children

Summary

- Middle ear infections are common in babies and young children.
 - Glue ear can develop after a middle ear infection.
 - By the time a child is six years old, middle ear infections are much less common.
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Babies and young children are prone to middle ear infections, called otitis media. Pus or fluid builds up in the ear canal behind the ear drum, which causes pain and mild deafness. Sometimes, the ear drum bursts, releasing the fluid and making the child feel better. (Burst ear drums usually heal up by themselves.)

While most ear infections improve without any treatment, doctors prefer to use antibiotics to clear up severe cases.

Symptoms of middle ear infections

Four out of five children will get a middle ear infection at least once. Some of the symptoms of middle ear infection include:

- Earache
- Headache
- Fever
- Discharge from the ear
- Mild deafness
- Difficulties in sleeping
- Loss of appetite.

Hearing loss

Sound doesn't travel well through fluid, so a child with an ear infection may have hearing difficulties. To them, normal speech will sound like a whisper. This only lasts as long as the infection, with no link to any permanent hearing loss. However, constant middle ear infections might delay a young child's speech development, simply because they can't hear very well.

Common after a cold

Middle ear infections are caused by either bacteria or viruses and can be triggered by a cold. Babies and young children are more likely to develop middle ear infections because they are still building up their immunity. Once a child reaches the age of around six, infections are less common because the tube connecting the nose to the ear, called the Eustachian tube, is mature.

Some precautions

You can reduce the risk by:

- Limiting day care – exposure to other children increases a baby's odds of catching a cold.
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- Breastfeeding – offers better immunity than bottle feeding. Propping up a bottle with the child lying down should be avoided as milk may enter the Eustachian tube and increase the risk of ear infection.
- Not smoking – passive smoking is a risk factor.

Treatment for ear infections

Mild infections clear up by themselves in a matter of hours. Over-the-counter painkillers can help the child feel more comfortable. In more severe cases, antibiotics might be needed. Ear drops may also be recommended by your doctor.

Glue ear

'Glue ear', when the ear fills up with thick fluid, can develop after a middle ear infection. If antibiotics can't clear the pus, an operation might be needed. A small hole is made and a tube called a grommet is inserted to help drain the fluid. In some cases, an injection of a strong antibiotic can be used. Glue ear becomes less common as the child grows older.

Wax problems

Sometimes, the ear can fill up with wax, impairing a child's hearing. Your doctor can use a syringe to gently fill the ear canal with warm water and float out the wax plug.

Where to get help

- Your doctor
- Ear, nose and throat specialist

Things to remember

- Middle ear infections are common in babies and young children.
- Glue ear can develop after a middle ear infection.
- By the time a child is six years old, middle ear infections are much less common.

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