

Information Leaflet for parents

# Ear problems and grommets

Revised January 2005

## What is glue ear?

The ear is divided into three parts, the outer, the middle and the inner ear. The Middle ear is a space behind the eardrum, which should be filled with air. During the act of swallowing, the air in the middle ear is replaced, via the Eustachian tube, which connects with the nose. Glue ear is a build up of fluid in the middle ear air space. The cause of this is poor function of the Eustachian tube. There are a variety of reasons for this, including irritants, enlargement of the adenoids and infection.

## What effects can glue ear have?

Glue ear can lead to varying degrees of poor hearing, as the passage of sound to the inner ear is affected by the presence of glue. Poor hearing may cause the child's speech and language development to be affected and may cause problems at school. The presence of glue in the ear can also cause pain in some children. If your child has persistent problems, placing grommets in your child's ears can help.

## Diagnosis

A doctor will ask you questions about your child's hearing and will then examine your child's ears. It is important for the doctor to take a detailed history to ensure that surgery is necessary. It is also important to tell the doctor about any other medical problems that your child or family has before the operation e.g. low

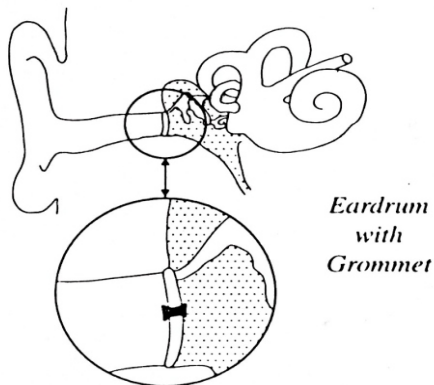
blood counts, anaesthetic problems.

A hearing test will then be performed, to assess the level of hearing and also to assess the movement of the eardrum.

## Treatment

Middle ear problems are very common in childhood and usually cure themselves over time. Avoidance of irritants such as frequent swimming in heavily chlorinated pools and exposure to cigarette smoke may help to speed natural recovery.

In many cases no treatment is necessary, but regular hearing tests and check-ups will be required.



Medication seldom helps long-standing glue ear.

Hearing aids are the best treatment for some children but placement of grommets in the eardrums is the most commonly used treatment for children with persistent problems. A grommet is a small plastic tube, which helps to ventilate the middle ear and discourage the glue from forming. The grommet acts like an artificial Eustachian tube, equalising air pressure with atmospheric pressure. While they are in place the hearing is usually normal.

### **Benefits of grommets**

With a grommet in place the ear usually hears normally and is free from earaches.

### **Risks and complications of grommets**

The risk of serious or life threatening complications in grommet surgery is extremely low.

- Children with grommets in place sometimes develop a runny ear. This can usually be dealt with by the G.P, who will prescribe drops or antibiotics. Sometimes it can become a persistent/recurrent problem and a return to the ENT clinic may be needed.
- Grommets usually work their way out of the ear after 6-8 months and the eardrum heals. Sometimes they need to be removed under

general anaesthetic, but quite rarely. As the child grows, the size and function of the Eustachian tube should improve, so that the ear problems should decrease. However, if the fluid recurs, it may be necessary to insert another grommet. Long stay grommets with long flanges which retain the grommet in the ear longer, are sometimes used in recurrent cases of glue ear.

- The complications of grommets include scarring of the eardrum and perforations. These are uncommon but we recommend that you discuss the operation with the surgeon, ensuring that you understand the implications. It is rare for there to be serious long-term adverse effects.

## **Alternative treatments**

The alternative to grommet insertion is for your child to wear hearing aids to amplify any sounds to the ear.

## **Follow up**

All children will be reviewed in the audiology and ENT department until their ear problems have settled.

## **The operation**

Your child will be admitted on the day of surgery and

will be in hospital for approximately half a day. You are most welcome to stay with your child during the admission.

Before the operation nurses and doctors will see you and your child. If you have any concerns, please do not hesitate to mention them.

You are able to go with your child to the anaesthetic room until they are asleep. A nurse from the ward will also be with your child so if you feel unable to go to the anaesthetic room your child will be with a nurse he/she knows.

Under a short general anaesthetic, a tiny cut is made in the eardrum. This is called a **myringotomy**. The glue is sucked from the middle ear. A grommet is then placed in the eardrum.

## After the operation

Your child will be given painkillers in theatre. They may experience a little discomfort for the next 24-48 hours, so we advise regular paracetamol/calpol if required. Sometimes you will see discharge from the ear for a couple of days. This is normal, do not however hesitate to contact us if you are worried.

When washing your child's hair it is advisable not to allow water into their ears.

When your child has grommets they should experience no problems on an aeroplane.

Your child is able to go swimming, but it is advisable for them not to dive under the water.

### **Long term term**

- Most children grow out of the condition.
- About 20% of children will need second or subsequent grommet insertion.
- As with all medical conditions there is a small subgroup whose middle ear problems are worse than average and who may go on to develop long term ear disease. We hope to minimise this number with Out Patient follow up.

**Please use this space to write down any notes or questions you might have**

## Further Information

If you have any concerns about your child's admission to hospital, please do not hesitate to contact Jo Williams. She is an Advanced Nurse Practitioner and will answer any questions or queries you may have. You can contact her, by phoning the hospital switchboard on

**0121 333 9999 and ask them to bleep her on bleep 55183**

Information can also be found on the Internet. For more information you may find this website useful

<http://www.medicdirect.co.uk>

Internet access is available in the Child and Family Information Centre. This is on the ground floor of the hospital near the Welcome Desk.