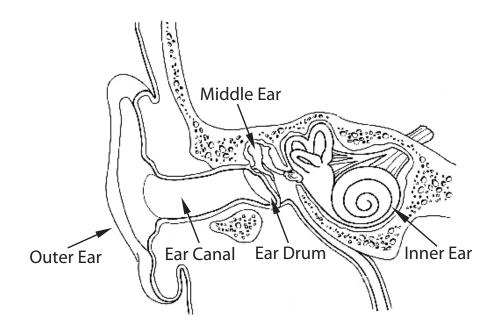
Otitis Media in Children

A GUIDE FOR PARENTS

What is otitis media?

Acute otitis media is an infection behind the eardrum. This is also known as a middle ear infection. Symptoms include pain in the ear, fever, cranky child, waking at night and less hungry. It is common in babies and young children but can occur at any age.



A. How do children get it?

An ear infection usually happens after a cold or the flu. Washing hands will help prevent ear infections. Other causes in babies and children can be: going to daycare, using a pacifier, bottle feeding when lying on their back, and exposure to cigarette smoke. Breastfeeding and immunizations may help protect against ear infections.

B. What to do?

- You can give your child an over-the-counter pain reliever for the pain and soreness. Children can
 be given medicines like acetaminophen (such as Tylenol®, Tempra®, etc) or ibuprofen (such as
 Advil® or Motrin®) but not both at the same time.
- Do not give children acetylsalicylic acid/ASA (Aspirin®) because it can cause Reye's syndrome and harm them.
- Most children **do not** need antibiotic drugs for an ear infection. In most children (about 80%), the ear infection will clear up without the use of antibiotics.
- Drugs like decongestants, antihistamines and steroids do not help dry up the fluid in the ear.

Good medical follow-up is important.

- If your child seems to be getting worse, then take them to see their doctor.
- If your child is still not well after 2 to 3 days, then take them back to their doctor to see if antibiotics are needed.
- If the doctor prescribes antibiotics but your child is still sick (pain and fever have not gotten better) after 3 to 5 more days, then check with the doctor to see whether antibiotics need to be changed.
- After 3 to 6 months, make a follow-up appointment with your doctor to check that fluid has not been left behind the eardrum.
- Your doctor may refer your child to an ear, nose and throat specialist (otolaryngologist) if ear infections occur three or more times in 6 months, or four or more times in 12 months.

C. Complications

- If you see fluid or blood draining from your child's ear, take him/her to the doctor.
- Sometimes the pressure from an ear infection makes a hole (ruptures or perforates) in the eardrum.
 This is usually not a serious problem and most ruptures heal within 6 weeks without treatment.
 - No water and things like cotton tip swabs (Q-tips®) in the ear.
 - Have a follow-up visit with your doctor 6 weeks after the rupture.

D. More information

Further information can be found:

 HealthLink BC – health information for British Columbians <u>www.healthlinkbc.ca</u> or telephone 8-1-1

Pain Relief Acetaminophen (10-15 mg/kg) _____ mg up to 5 times per day OR Ibuprofen (5-10mg/kg) ____ mg up to 4 times per day Comfort Apply warm compress (warm face cloth) to the ear Encourage your child to rest as much as possible Antibiotics (if necessary) Amoxicillin ____ mg, ___ times per day Tother ____ mg, ___ times per day Follow-up 2-3 days ____ 3-6 months ____ Other