Caring for Your Child’s Ear Infection

By Kent Keele, DO

Otitis Media, commonly referred to as middle ear infection, is an ailment that most parents are familiar with. It is the most common ailment requiring medical therapy in children under five years old. It can be a frustrating problem for both parents and the children that suffer through the recurrent pain and hearing loss. Parents often ask what makes one child more likely to get an ear infection than another. Risk factors include allergies, the use of daycare, having older children in school that might expose the younger sibling to a viral illness and exposure to tobacco smoke. There has also been some evidence that children who were breastfed for the first twelve months of life have a decreased chance of recurrent otitis media.

If risk factors can’t be decreased, treatment to clear the infection may be needed. An ear infection can be treated with analgesics and topical pain relievers, while the body’s own defenses work to resolve the infection. Twenty percent of ear infections need medical intervention in order to resolve. If conservative measures fail to work, antibiotic therapy may be needed. The first line of antibiotic therapy is oral amoxicillin or antibiotic ear drops. If there is no improvement in the first three days a change in antibiotic may be warranted.

Despite appropriate therapy, some children will continue to suffer from recurrent ear infections and a consultation with an Otolaryngologist may be recommended by your physician. Many children will require Tympanostomy tube placement or ear tubes. The most common criteria to determine when it is time to consider placing ear tubes is when your child has more than 3 episodes of acute otitis media in 6 months or 4 in a year, or fluid in the middle ear for 3 months or more. There are instances when intervention may be recommended earlier, such as when there are preexisting medical conditions or previous infections have been severe.

In order for children to develop age appropriate speech and language skills, they must be able to first hear what those around them are saying. The hearing loss that occurs with a chronic or recurrent ear infection can be detrimental to your child’s speech development and can lead to problems in both social settings and academic performance. Our goal in treating ear infections is to improve hearing and ensure your child the best opportunities to develop natural speech, language and academic success.

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