

FACTSHEET

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Glue Ear and Grommets

What is glue ear?

The lining of the middle ear keeps moist by making a watery liquid. Sometimes this becomes thick and 'gluggy' like 'glue'. When this happens it is called 'glue ear'; officially Otitis Media with Effusion or Mucooid Otitis Media.

How did the 'glue' get there?

The middle ear connects to the back of the nose by the Eustachian tube. This Eustachian tube is normally closed, but opens for a moment with each swallow or yawn that we do. At that moment, a bubble of air can enter the middle ear and excess liquid empties out. If the lining of the Eustachian tube is swollen when a child has a severe cold, or particularly if the child has allergic rhinitis (nasal allergy), the tube can become blocked. Similarly if the muscles to open the tube do not work properly (as happens often in a child with a cleft palate) the tube may not work properly. In these situations the fluid cannot empty out, accumulates and in time thickens to 'glue'. Infections can form in the 'glue' (fluid).

Children living with smokers are much more likely to suffer 'glue ear'.

How could this 'glue' affect my child?

The 'gluey' fluid dampens the vibrations of the eardrum and bones in the middle ear and dulls hearing.

You may notice your child might need the volume on the TV increased, or when you are talking to them, they may appear not to be paying attention.

Children could also experience problems with balance, becoming 'off balance'. Some children may become

irritable. If these concerns arise, then your child needs to see your family doctor.

The hearing loss, which occurs with fluid in the ear ('glue ear'), may affect your child's speech development, their understanding of language, and possibly their reading and spelling.

How can it be treated?

In many cases the 'gluey' fluid clears away without any treatment and a watchful waiting (wait & see) approach is taken, especially over summer when colds are less frequent.

Within one month about 50% of children have cleared their fluid and hearing is back to normal but it can take up to 3 months.

If symptoms of 'glue ear' persist then insertion of tiny ventilation tubes ('grommets') may be advised.

What are grommets?

A 'grommet' is like a tiny tube that is surgically placed into the eardrum to let fresh air into the middle ear.

Grommets are known by a few different names but they all work in the same way to allow air into the middle ear. Some of the other names are ventilation tubes, drainage tubes, Shepard's tubes, Collar Button tubes and T- tubes. You may hear other names as well so ask your doctor to explain this to you. The names describe tubes of various shapes and sizes.

How do they work?

At surgery the fluid is suctioned out and the grommet allows air to enter the middle ear. Once air can enter the middle ear it helps to improve your child's hearing by

allowing the tiny bones of hearing and ear drum to move freely again.

Hearing should improve immediately.

Grommets will gradually fall out of the eardrum after 6-12 months, depending on the size, shape and material of the grommet, and the nature of that ear.

The hole in the eardrum made for the grommet normally heals quickly when the grommets fall out.

The fluid may come back in some children and further treatment may be needed. Some children need grommets again.

Will my child need to go to hospital to have grommets inserted?

Yes, your child will need to be in hospital to have the grommets inserted, as a tiny cut is made in the eardrum under a general anaesthetic. It is a day-stay procedure. Sometimes the adenoids are also removed to improve the drainage of the Eustachian tube at the same time. This is still a day-stay surgery. Your doctor will discuss with you whether this may be needed.

The hospital will contact you to advise you on what time your child needs to arrive at the hospital; from what time you need to fast your child and what you need to bring along for your stay.

Before the operation commences your child will be given an anaesthetic to put them into a deep sleep so that they will not feel any discomfort during the procedure.

After the surgery your child will be able to go home within a few hours. This will be decided upon once the child has woken.

What do I need to know about grommets when at home?

Your child shouldn't experience much discomfort or pain after the operation.

A slight ooze or bleed from the ear for the 1-2 days after the operation is normal.

You should contact a doctor if your child has a lot of discomfort and pain after the operation, or if discharge (fluid) from the ear continues for more than 5 days.

After your child has the grommets inserted you need to be careful of water getting into the ears until the grommets have come out of the ear drum and the eardrum is fully healed. (Grommets normally fall out of the ear after 6-12 months)

It is particularly important to keep dirty water (which contains a lot of germs) out of the ear while grommets are in. 'Dirty water' is bath water, heated pools, spas, and rivers, lakes, dams and creeks.

Keep ears dry when bathing and washing hair. Showering, even with hair shampooing is OK. So it is easier to shower rather than bathe your child.

If a bath is used then have it very shallow and wash hair with clean water from the hand basin or use a hand spray attachment. If none of this is possible then earplugs should be used.

There are a few different things you can use as ear plugs:

- Cotton wool smeared with Vaseline
- Custom made ear plugs can be made by hearing aid suppliers
- Soft plastic plugs can be bought at some shops
- Silicone ear putty
- Blu-tac

it is important that if you use ear putty or Blu-tac that you use a piece as big as your child's outer ear and not a piece small enough to get stuck in the ear canal.

Can we still go swimming?

Yes, but not for the first week after the operation - however still no diving.

Swimming at an ocean beach needs no special care. But in other places ear plugs should be used. These need to be supported with a swimming cap or an ear wrap-type headband.

What if water gets in my child's ears while the grommets are there?

Chances are nothing will happen, however there is a risk an ear infection may develop. This will be seen as discharge (fluid) coming from the ear. Ear drops (and occasionally antibiotic medicine) may be prescribed to clear infection. Your child should not swim until the infection is gone.

Do I need to know anything else?

Because hearing loss occurs in glue ear, it is important that your child has a hearing test after the glue ear is better; that is soon after the grommets have been inserted, or if the glue has resolved.

Hearing tests for children are available in some hospitals, community health centres and in some ear, nose and throat specialists' offices. Children under 4 years of age need specialised testing which is available only at certain facilities. Your doctor will be able to refer you to an appropriate place to test your child's hearing.

If the hearing is not back to normal, further investigation is needed.

If your child has grommets they will need to have their ears checked regularly to see if the grommets are still in the eardrum and still working.