What are ear infections?

Most ear infections are located in the middle ear. The middle ear is found in the small space behind the eardrum. This can fill with fluid. When the fluid there becomes infected with bacteria, it is called acute otitis media.

Build-up of fluid that is NOT infected with bacteria, but instead is caused by increased pressure in the middle ear, is called otitis media with effusion.

Whether they are caused by bacteria or increased pressure, ear infections can be uncomfortable, can be painful, and possibly can lead to communication problems.

How common are ear infections?

Ear infections are very common during childhood. There is a tube, called the eustachian tube, between the middle ear and the back of the throat. This tube opens and closes to let the fluid out of the ear. Tubes in children are smaller and lay flatter than tubes in adults. This is why 75% of children will have an ear infection before their third birthday. Half of these children will have three or more cases of otitis media by age 3. When children have frequent and recurring otitis media, it is referred to as chronic otitis media.

Fluid that doesn’t go away is called constant ear fluid. This is common in children under 2 years of age. Older children don’t have this as often. Fluid in the ear can take 6 to 8 weeks to go away—sometimes longer. This fluid can cause a temporary conductive hearing loss. Fluid that stays in the ear for too long can cause “glue ear.” This means that the middle ear fills with glue-like fluid instead of air, resulting in severe infection and/or more severe hearing loss. Hearing loss at a young age can affect speech and language development.

What are the signs of an ear infection?

It can be hard to know whether your child has an ear infection. Signs of an ear infection include the following:

• tugging or pulling at the ear
• crying more than usual
• having a cold with a runny nose
• having a fever
• not responding to sounds
• having trouble sleeping
• having drainage from the ear

How are ear infections treated?

Fluid in the ears or an ear infection can be diagnosed and treated by a pediatrician or an otolaryngologist (ENT) physician. Otitis media with and without effusion can be treated in the following ways:

• Watch and wait: If the fluid is not infected, you may have to take a watch-and-wait approach to allow the fluid to go away on its own. For many children, ear fluid will go away in a few weeks or months.
• Antibiotics: If the fluid is found to be infected, the doctor can prescribe antibiotics. If the doctor prescribes medicine, the child should finish all of the medicine to make sure that the infection is gone.
• Pressure equalization (PE) tube(s): If the fluid is chronic, the ENT can perform a quick outpatient surgery to put in PE tube(s).
Talk with your child’s doctor about what is best for your child. It is important to keep follow-up appointments to ensure that your child’s ears are healthy.

How can ear infections affect my child’s hearing?

Fluid in the middle ear makes it harder for your child to hear because of a conductive hearing loss. Imagine if you were trying to hear something underwater. That is what it might sound like to your child: muffled and unclear.

This conductive hearing loss does not occur in all children. It can be mild or more severe. The conductive hearing loss may go away once the fluid is gone from the middle ear. However, when ear infections occur over and over again, permanent damage to the eardrum or middle ear bones can occur. Therefore, it is important that ear infections be treated properly.

Fluid in the ear that is not infected can present a special problem because there are no symptoms of pain and fever. Weeks and even months can go by. During this time, the child may miss out on information that can influence speech and language development. It’s important to take your child to regularly scheduled appointments with the pediatrician. The doctor will check your child’s ears at each visit. You should let the doctor know if your child has trouble hearing or responding, or if your child’s language seems delayed.

What should I do if I think my child has an ear infection?

Ear infections require immediate attention, most likely from a pediatrician or an ENT. If your child has frequently recurring infections and/or chronic fluid in the middle ear, two additional specialists should be consulted: an audiologist and a speech-language pathologist. An audiologist will test for hearing loss and for middle ear problems—even in very young children. A speech-language pathologist will check your child’s specific speech and language skills and development, and can recommend and/or provide programs when they are needed.

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Content contributed by ASHA member Sydney Bednarz, AuD, CCC-A.

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