

Glue ear

A common cause of temporary hearing loss

A guide for parents



Our vision is of a
world without barriers
for every deaf child

Introduction

Glue ear can cause temporary hearing loss. If your child has glue ear they might not be able to hear you properly.

Glue ear is one of the most common childhood illnesses. Most children will experience glue ear at least once. It is most common in young children under the age of five years. It can also affect older children and continue to be a problem as children grow up.

Glue ear is often linked with ear infections. It can sometimes develop unnoticed.

Does your child:

- ignore you when you call them?
- struggle to work out where sounds are coming from?
- have problems keeping up with conversations?
- have difficulty concentrating?
- quickly become tired and frustrated?
- prefer to play alone?
- have pain in their ears?
- get lots of ear infections?
- have problems understanding the teacher at school?

Some of these signs can be mistaken for a child being stubborn, uninterested, rude or naughty.

If your child has hearing problems for a long period of time it can affect the way they develop speech. They might not hear words clearly when other people are speaking so they might not say words or parts of words clearly themselves.

Children with glue ear can fall behind at school if they do not have extra support.

Do not ignore glue ear and ear infections

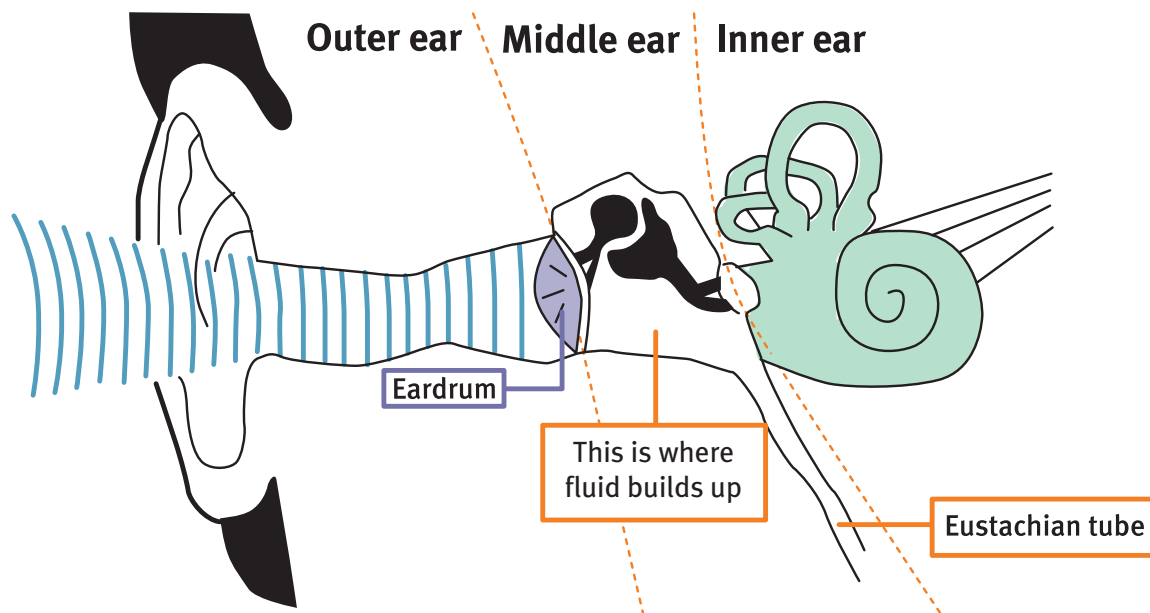
If glue ear and ear infections go untreated for a long time there is a risk of permanent damage to the ear and permanent hearing loss. Infections can spread and become very serious. If you are worried about your child's ears or their hearing, you should take them to see a doctor as soon as possible.

What is glue ear?

Glue ear is a build-up of fluid in the ear. This happens in a part of the ear called the middle ear. The fluid is a runny liquid which can become sticky like glue as it fills the middle ear.

Our ears are made up of three main parts: the outer ear (the part you can see), the middle ear and the inner ear. For our ears to work properly the middle ear needs to be full of air. The air travels to the middle ear through a tube called the Eustachian tube which runs from the back of the nose and throat to the middle ear. If this tube becomes blocked, air cannot travel to the middle ear. When there is no air in the middle ear it begins to fill with fluid.

In children the Eustachian tube is smaller and at a flatter angle so it does not work as well and might get blocked more easily.



When fluid blocks the middle ear, it becomes harder for sounds and noises to pass through to the inner ear to be heard properly. Quieter sounds are especially difficult to hear. It is like listening to the world with your fingers stuck in your ears. This is hard work – try it!

Remember: if your child has glue ear they might not hear everything you say to them.

What causes glue ear?

We do not always know the exact cause of glue ear. There are many different things that can increase the risk. These include ear infections, colds and flu, allergies and passive smoking. Children with cleft lip and palate or with conditions such as Down's syndrome might be more likely to get glue ear because these conditions can affect the Eustachian tube.

What should you do?

If you are worried about your child's hearing, you should take them to see a doctor as soon as possible. The doctor can examine your child's ears and should be able to tell you if they have glue ear.

Often glue ear is linked to a bad cold and will clear up by itself when the cold has gone. If your child has severe pain in their ears or other signs of an ear infection such as a fever, the doctor might give them antibiotics. The doctor might want to wait and see if the glue ear clears up by itself without treatment before they refer your child to see a specialist ear doctor.

At the hospital

A specialist ear doctor will examine your child's ear and carry out tests to check their hearing and look for signs of fluid in the middle ear. They might carry out tests to check your child's eardrum. If there is fluid in the middle ear the eardrum will not be working properly.

For most children, glue ear will clear up by itself within three months. So, after the initial tests, it is usually a good idea to monitor the glue ear with repeated tests at least three months apart. If the glue ear does not clear up, your child might be offered grommets (ear tubes) or temporary hearing aids.

If your child has glue ear, doctors might give them decongestant medicine. Your child might receive other treatments for any conditions that could be causing their glue ear.

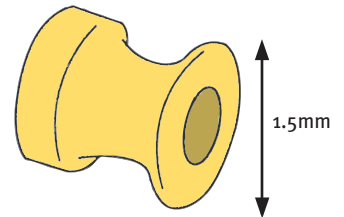
Treatments for glue ear

Grommets (ear tubes)

Grommets are tiny plastic tubes that are put into the eardrum. This is done during a short operation in hospital under a general anaesthetic. The grommets (ear tubes) allow air to flow into the middle ear and stop more fluid building up.

Sometimes the surgeon will want to remove your child's adenoids during the operation. The adenoids are glands at the back of the nose that can block the opening of the Eustachian tube if they become infected and swollen.

Grommets (ear tubes) usually stay in until the eardrum has healed and pushed them out. This might take several months. Sometimes the glue ear comes back and the hospital doctors might think about another grommet operation.



Picture of a grommet (ear tube)

Hearing aids

Hearing aids can be helpful for children with any level of hearing loss. There are different types of hearing aids that are suitable for children with glue ear. Most hearing aids work by making sounds louder when they go into the ear. Most children use behind the ear hearing aids in each ear.

Hearing aids are used on a temporary basis for glue ear. They can be helpful because your child might have hearing problems for long periods of time while they wait for the glue ear to clear up or while they wait for a grommet (ear tube) operation. It is important to make sure that your child's speech and education do not suffer during this time.

Hearing aids can be especially helpful for children who have repeated problems with glue ear or for children who are unable to have grommet (ear tube) surgery.

Autoinflation

Autoinflation is a treatment for glue ear which involves your child blowing up a special balloon with their nose. This can help to open up the Eustachian tube so fluid drains away and allows air to fill the middle ear again.

Preventing glue ear

Breastfeeding

Breastfeeding can reduce the risk of babies and young children getting glue ear. It is thought that breast milk contains proteins which help to protect your child against glue ear. This protection can continue even when breastfeeding has stopped.

No smoking

All children are more likely to get ear infections and glue ear if they are regularly in places where people are smoking. Your child is likely to continue to experience glue ear as long as they spend time in smoky places.

You should try to make your child's daily environment smoke free. This means around the home and other places your child spends time (at school or where they play). If you cannot make your child's surroundings completely smoke free, try to make sure that people only smoke in places that your child does not use much. It is important to remember that simply opening a door or window is not enough as many dangerous smoke particles will stay in the air.

If my child has glue ear, how can I make hearing easier for them?

At home

Some simple communication tips can make hearing easier for your child.

- Get your child's attention before you start talking to them.
- Make sure you face your child and keep eye contact as much as possible.
- Keep background noise down (turn off the TV or radio).
- Speak clearly and do not shout.
- Use your normal rhythm of speech.

At school

The teacher or school nurse might realise that your child is having problems at school but they might not realise the problems are due to hearing loss. It is important that you tell the teacher about your child's hearing problems so the school can make arrangements to help. Your child needs to sit near the teacher to help them hear and understand lessons in the classroom. They should not feel awkward about asking for things to be repeated if they do not hear them the first time.

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