**Middle ear disease - What is it?**

*Middle ear disease* – also known as otitis media – refers to all forms of inflammation and / or infection of the middle ear.

**What causes middle ear infections?**

An active inflammation or infection is nearly always associated with fluid in the middle ear space. This fluid affects the movement of the three small bones in the middle ear – the ossicles – and hence can affect hearing. Often, middle ear disease results from the Eustachian tube not functioning as it should. When you swallow or yawn, this tube normally opens to allow air into the middle ear space and prevents the build-up of fluid.

Most children experience middle ear disease at some stage during early childhood. In most cases, the condition resolves itself quickly with limited or no medical intervention.

It is a recurring problem. Much like the common cold, children can develop this problem regularly.

**Why is this significant for Aboriginal and Torres Strait Islander children?**

Aboriginal and Torres Strait Islander children have one of the highest rates of middle ear disease and hearing loss in the world. These children experience it:

- **Earlier**: They can contract the disease and hearing loss in their first weeks of life.
- **Frequently**: They suffer from the disease and hearing loss often and repeatedly.
- **Severely**: They can develop worse forms of the disease and greater levels of hearing loss.
- **Persistently**: They can experience the disease and hearing loss for longer periods of time.

**How does it affect children?**

The impacts of middle ear disease and hearing loss are substantial at any age. But in young children it can affect childhood development – including speech, language and cognitive development. In some cases,
the recurrent nature of the disease can also lead to permanent hearing loss.

Middle ear disease and hearing loss can lead to long-term developmental and learning problems, often seen in the educational and home environments.

As children go through early childhood education and into school, the disease impacts upon their school readiness, communication skills, learning abilities and educational outcomes. In the home environment, it can affect a child’s family relationships, social skills and contribute to perceptions of their behavioural problems.

The impacts of middle ear disease and associated hearing loss can have far-reaching social and economic consequences because they influence the trajectory of children’s lives towards adolescence and adulthood, including future employment outcomes.

**Signs and Symptoms**

Often there are no obvious signs, especially in very young children.

Some signs might include: your child pulling at their ears; fever; a complaint of ear pain, discharge from the ear; dizziness or clumsiness; congestion related to a cold or your child being unusually grizzly and grumpy.

In older children these signs might include decreased alertness; asking you to repeat things; asking to turn sounds up; boredom; watching others for cues; poor concentration and behavioural problems.

**How to keep ears healthy**

- Wash children’s hands and faces regularly.
- Ensure children eat healthy foods like fruit and vegetables.
- Make sure children get all their vaccinations.
- Get children to blow their nose, then wash their hands.
- Breastfeeding helps babies fight disease, so it is important to do so for as long as possible.
- Avoid smoking around children.

**What to do if you’re worried about your child**

- Please immediately take your child to your local health centre and ask for their ears to be checked by a doctor, nurse or health worker.
- Don’t stick anything in a child’s ears, unless recommended by a health worker, nurse or doctor.
- Call 13HEALTH (13 43 25 84) for further information

For more information, visit the following websites:

Care for Kids’ Ears
http://www.careforkidsears.health.gov.au

Deadly Ears