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’. The official name is Otitis Media with Effusion or Mucoid 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 closed, and 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. The tube can become blocked if the lining of the Eustachian tube is swollen. This happens when a child has a severe cold, or if your child has allergic rhinitis (nasal allergy). If the muscles that open the tube do not work (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 child might need the volume on the TV increased, or when you are talking to them, they may not seem to pay 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 happens with fluid in the ear (‘glue ear’), can affect your child’s speech development, their understanding of language, and their reading and spelling.

How can you treat it?
The ‘gluey’ fluid can clear away without any treatment, especially over summer when colds are less frequent. Without treatment, about 50% of children clear their fluid in one month, and their hearing is back to normal. It can though take up to 3 months.

If symptoms of ‘glue ear’ continue, then your child may need to have tiny ventilation tubes (‘grommets’) inserted.

What are grommets?
A ‘grommet’ is like a tiny tube that is placed in to 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 these to you. The names describe tubes of different shapes and sizes.

How do they work?
In surgery the fluid will be suctioned out and the grommet inserted to allow air to enter the middle ear. Once air can enter the middle ear it improves your child’s hearing by allowing the tiny bones of hearing and the ear drum to move again.

Hearing should improve immediately.
Grommets will 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 heals quickly after the grommet falls 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. 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 begins, 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 once your child has woken.

**What do I need to know about grommets when at home?**
Your child shouldn't feel much discomfort or pain after the operation.

For 1-2 days after the operation, your child may have a slight ooze or bleed from the ear.

Contact your 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 healed. (Grommets fall out of the ear after 6-12 months).

While grommets are in, it is important to keep dirty water (which contains a lot of germs) out of the ear. ‘Dirty water’ is bath water, heated pools, spas, 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 bath your child.

If your child has a bath, 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 use earplugs.

There are a few different things you can use as ear plugs:
- Cotton wool smeared with Vaseline
- Custom ear plugs can be made by hearing aid suppliers
- Soft plastic plugs can be bought at some shops
- Silicone ear putty
- Blu-tac

If you use ear putty or Blu-tac make sure 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 - but no diving.

Swimming at an ocean beach needs no special care. But use ear plugs in other places. Support these 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, but there is a risk an ear infection may develop. An ear infection will be seen as discharge (fluid) coming from the ear. Ear drops (and occasionally antibiotic medicine) may be needed to clear infection. Your child should not swim until the infection is gone.

**Do I need to know anything else?**
It is important that your child has a hearing test after the glue ear is better. This is because hearing loss can happen with glue ear. Have your child’s hearing tested 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 refer you to an appropriate place to test your child’s hearing.

If the hearing is not back to normal, take your child for further investigation.

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.