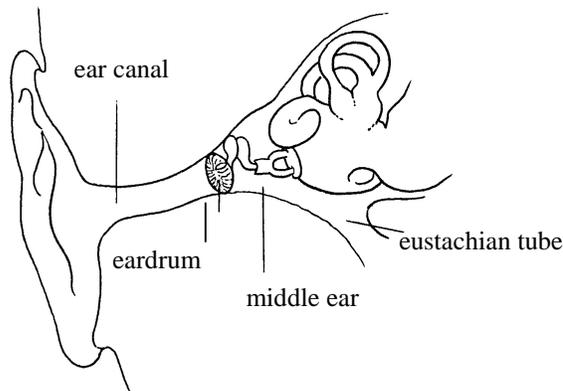


## Otitis media

### What is otitis media?

Otitis media (oh-**tite**-iss **mee**-dee-ah, or middle ear infection) is one of the most common childhood illnesses. It is caused by a virus or bacteria that travels from the nose or throat along the eustachian tube to the middle ear. Ear infections do not spread to others.



Otitis media can also occur if the eardrum gets a hole in it—from injury or repeated infections.

A baby who lies down while drinking from a bottle may get more ear infections: The formula, milk, or juice can go up through the eustachian tubes, irritating or swelling them. The sugar in these liquids causes germs to grow.

### What are the signs of otitis media?

- earache, especially at night
- pulling hard or poking at the ear
- shaking the head
- runny nose, cough, or sore throat
- crabby, more crying than usual
- not eating or drinking as usual: baby may pull away from the breast or bottle when drinking
- not hearing well, or ear feels “plugged”
- fluid draining from the ear

### What is the treatment?

Acetaminophen (Tylenol® or another brand) or ibuprofen (such as Advil®) can be given for comfort. Sometimes a warm (not hot) washcloth or heating pad over the ear helps it feel better.

Your health care provider may prescribe an antibiotic to kill the bacteria causing the infections. Give the medicine for the prescribed amount of time, even if your child feels better, to be sure all the infection is gone. (**Note:** If the infection is caused by a virus, antibiotics may not help.)

Your child can go outside. The ears do not need to be covered; this will not protect or heal an ear infection. But cover the ears if your child finds it more comfortable, especially in cold or windy weather.

Swimming is okay, as long as there is no hole or tear in the eardrum and no drainage from the ear. (If your child has ear tubes, ask your doctor or nurse practitioner what you should do.) Your child should not dunk the head underwater, as this may force water up the nose and into the eustachian tubes.

Your child can return to school or day care when feeling better and any fever has been gone for 24 hours.

Make an appointment with the clinic to have the ears checked 2 weeks after starting the antibiotic. It is important to make sure the infection is gone and your child needs no more treatment.

### **What else do I need to know?**

To prevent ear infections, do not give your child a bottle in bed—or give only plain water in bottles used in bed.

Avoid smoke in the home. Research has shown that children in homes where there is cigarette smoke have more colds and ear infections. Smoke may also paralyze the fibers in the air tubes that help move mucus and germs out of the body.

### **When should I call the clinic?**

- not feeling better in 48 to 72 hours after starting the antibiotic
- ear drainage continues after taking the antibiotic for 48 hours
- a new skin rash occurs
- your child has new symptoms and seems to feel worse

### **Questions?**

This sheet is not specific to your child but provides general information. If you have any questions, please call the clinic.

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: [www.childrensmn.org](http://www.childrensmn.org).

Children's Hospitals and Clinics of Minnesota  
Patient/Family Education  
2525 Chicago Avenue South  
Minneapolis, MN 55404  
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