

Tackling Ear Infections in Tots

(NAPSA)—Nothing seems more painful for children or frustrating for parents than middle ear infections. With three out of four children suffering from at least one middle ear infection before age three, and half of these children experiencing repeat infections, it may seem like children are always sick. Middle ear infections are the most common infection for which antibiotics are prescribed for children in the United States, leading to about 16 million doctor visits each year. To help parents and physicians, the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) recently released guidelines for the diagnosis and treatment of ear infections.

New Guidelines Advocate Optimal Antibiotic Therapy

The new guidelines offer clear recommendations for the diagnosis of ear infections, beginning with an evaluation of the child's history of ear infections, signs of fluid in the middle ear and presence of middle-ear inflammation. Based on the doctor's assessment and the age of the child, antibiotic treatment is recommended in the following cases:

- For children under six months
- For children between six months and two years of age, when a certain or definite diagnosis is made
- For children two years and older, in cases of severe infection (temperature of 39°C/102.2°F and/or moderate to severe ear pain)
- For all children who have been observed for 48 to 72 hours and have not shown improvement



How Can I Tell if My Child Has a Middle Ear Infection?

Only a doctor can properly diagnose a child with an ear infection, but parents should monitor for differences in behavior. Also to note:

- Ear pain and fever are the most common symptoms of a middle ear infection
- Young children with limited communication skills often express these symptoms through ear tugging and persistent crying
- Your child may also be listless, irritable, have trouble hearing, or not feel like eating or sleeping
- Physicians diagnose the infection based on signs and symptoms and the appearance of the eardrum

What Causes Middle Ear Infections?

When a child has a cold or an infection, the eustachian tube, which connects the middle ear to the back of the throat, can become blocked and cause build-up of fluid in the middle ear. When fluid trapped in the middle ear becomes infected, a middle ear infection

can develop. The three most common middle ear bacteria are *Streptococcus pneumoniae*, *Haemophilus influenzae* and *Moraxella catarrhalis*.

What Are Some Ways to Prevent Middle Ear Infections?

Bacteria can cause middle ear infections. While some infections are unavoidable, teaching children to wash their hands frequently can reduce the spread of bacteria. Antibiotic-resistant middle ear infections are also a problem. Parents can assist in reducing these tough-to-treat infections by ensuring that antibiotics are taken correctly:

- The entire prescription should be taken, even if the child feels better after a few days
- Antibiotics should not be “saved” for future use
- Antibiotics should not be expected or requested for viral illnesses, such as cold and flu

How Can I Treat My Child's Middle Ear Infection?

After a careful diagnosis, middle ear infections can be effectively treated with antibiotics. The AAP/AAFP guidelines recommend treatment with amoxicillin for most infections. For children with severe illness and fever of 39°C (102.2°F) or higher, the guidelines recommend the use of amoxicillin/clavulanate potassium (90/6.4 mg/kg/day) [Augmentin ES-600®].

This treatment is also recommended for children who need additional coverage for common bacteria associated with the condition, including beta-lactamase positive *Haemophilus influenzae* and *Moraxella catarrhalis*. Other treatments are recommended for those children who are allergic to penicillin.