

PATIENT INFORMATION ON Understanding Ear Fluid

surgery through education, researach, and lifelong learning. The organization's vision: "Empowering otolaryngology-head and neck surgeons to deliver the best patient care."

QUESTION	ANSWER
What is ear fluid and how common is it?	Ear fluid, also called otitis media with effusion (OME), is a build-up of mucus or liquid behind the eardrum, without symptoms of an ear infection. Nearly all children get ear fluid at least once by school age.
How does ear fluid differ from an ear infection?	Ear infections (AOM) occur when germs (bacteria and/or viruses) enter the middle ear and cause fever, ear pain, and active (acute) inflammation. Both AOM and OME have fluid in the middle ear, but with OME the fluid is not actively infected and pain may be absent or minimal.
If my child gets ear fluid, how can I tell?	You might not be able to tell. Some children with OME have obvious hearing problems, but other children may have no symptoms at all or more subtle find- ings (e.g., ear rubbing, clumsiness, selective hearing, disturbed sleep). Your doctor can detect ear fluid by looking in the ear canal (otoscopy) or by mea- suring the movement of the eardrum (tympanometry or pneumatic otoscopy).
What causes ear fluid?	OME may be caused by a cold, an ear infection (AOM), or by the normal congestion (negative pressure) that many young children have in their middle ear. Often OME is detected during a routine doctor's visit and the exact cause is unknown.
Should I worry if my child has ear fluid?	Most fluid goes away on its own in weeks or months, especially if it was caused by a cold or an ear infection. OME is of more concern if it lasts more than 3 months or when your child has other problems that could be made worse by persistent ear fluid (e.g., delays in speech, language, learning, or development). Your doctor should check the ears periodically until the fluid is gone.
What is the best way to manage ear fluid?	There are many opinions about managing OME, but the best advice can be found in clinical practice guidelines, which make recommendations based on best available evidence and by considering the potential benefits and harms of different strategies.
	AOM, acute otitis media; MEE, middle ear effusion; OME, otitis media with effusion SOURCE: Rosenfeld RM, Shin JJ, Schwartz SR, et al. Clinical practice guideline (update): otitis media with effusion. <i>Otolaryngol Head Neck Surg.</i> 2016;154(1 Suppl):215-225.
AMERICAN ACADEMY OF OTOLARYNGOLOGY- HEAD AND NECK SURGERY FOUNDATION	ABOUT THE AAO-HNS/F The American Academy of Otolaryngology-Head and Neck Surgery (www.entnet.org), one of the oldest med- ical associations in the nation, represents about 12,000 physicians and allied health professionals who spe- cialize in the diagnosis and treatment of disorders of the ears, nose, throat and related structures of the head and neck. The Academy serves its members by facilitating the advancement of the science and art of medicine related to otolaryngology and by representing the specialty in governmental and socioeconomic issues. The
	AAO-HNS Foundation works to advance the art, science, and ethical practice of otolaryngology-head and neck surgery through education, researach, and lifelong learning. The organization's vision: "Empowering otolaryn-

www.entnet.org