



Ear Problems

Ear problems can involve the outer, middle or inner ear and commonly include infection, inflammation, damage from foreign bodies and wax build-up. The diagnosis of ear problems is often best made by a doctor who can examine the ear with a special instrument. Treatment is usually simple and effective.

Ear wax

Production of ear wax is normal in children and adults. The wax usually moves outward along the ear canal assisted by repetitive movements such as chewing and yawning. Wax build-up in the outer ear is one of the most common causes of temporary hearing loss.

Symptoms include:

- Ear discomfort
- A feeling that the ear is blocked
- Gradual hearing loss.

Treatment

Ear wax can often be dislodged by ear drops that soften the wax – ask a pharmacist. (**Note:** some products contain oils derived from nuts). If ear drops are not successful, a doctor can flush out a wax plug with water or saline ('syringing').

Self care

- Let each ear clean itself – as wax comes out of the ear canal, wipe it away with a cloth-covered finger.
- Do not clean the ear canal with hairpins, cotton buds, pencils or other objects – wax may be pushed further down the canal or the ear drum damaged.

Otitis externa

Otitis externa is inflammation or infection of the outer ear canal. The outer ear canal is the skin-lined canal which leads into the ear as far as the ear drum. Otitis externa is also called swimmer's ear or tropical ear, because it is commonly caused by prolonged exposure of the ear to moisture.

Symptoms include:

- Irritated, itchy ear
- Pain, often made worse by movements such as chewing
- Discharge from the ear (may be smelly)
- Mild hearing loss.

Treatment

Consult a doctor or pharmacist about otitis externa. Treatment may include

- Pain relief (e.g., paracetamol, ibuprofen).
- Careful cleansing of the ear canal.
- Ear drops to relieve inflammation and clear infection.

Self care

To prevent otitis external, keep the ear canals dry.

- Shake water from the ears after swimming and bathing.
- Use drying, antiseptic ear drops after swimming and bathing. Ask a pharmacist.
- Use water-repelling ear plugs during swimming and bathing. Ask a pharmacist.

Important

- Take children with earache to a doctor as soon as possible.
- If you have recently had a discharge from your ears or an ear infection, or have had a burst eardrum in the past, get a doctor to check your eardrum before using eardrops.
- Consult a doctor if any of the following occurs with an ear problem:
 - Pain lasting more than 24 hours
 - Fever, dizziness, stiff neck
 - Discharge
 - Hearing loss or ringing in the ears
 - Balance problems.

Foreign body

A foreign body in the outer ear canal can cause inflammation and damage. Foreign bodies include small insects, cotton buds and things children may put in their ears (e.g., beads, food).

Symptoms include:

- Pain
- Smelly discharge
- Temporary hearing loss
- Noise if object is an insect.

Treatment

It is best to consult a doctor for removal of foreign bodies.

Self care

Do not poke anything into the ear canal to remove a foreign body.

Otitis media

Otitis media is inflammation or infection of the middle ear. The middle ear is the air-filled cavity immediately behind the ear drum. The air pressure in the middle ear is kept normal by the eustachian tube, which connects the middle ear to the back of the nose. When the nose is congested (e.g., during a common cold), fluid can build up in the eustachian tube and the middle ear, leading to increased pressure and infection in the middle ear. Otitis media is especially common in young children.

Symptoms include:

- Pain
- Mild hearing loss
- Discharge from ear
- Fever
- Irritability – infants may be unsettled, wake at night, rub the ears, have diarrhoea, lose their appetite.

Treatment

Consult a doctor about otitis media. Treatment may include:

- Pain relief (e.g., paracetamol, ibuprofen, pain-relieving ear drops)
- Antibiotics. Antibiotics are not always needed. Otitis media often clears without antibiotics, but children should be reviewed again in 24-48 hours if their symptoms have not improved.

Self care

- A nasal decongestant may stop fluid moving up the eustachian tube. Ask a pharmacist.
- A warm cloth or cold pack may help relieve the pain.

Your **Self Care** Pharmacist

- Avoid swimming with a congested nose.
- Avoid deep diving, as water can be forced into the middle ear.
- Decongestants may help prevent ear pain when flying soon after an ear infection. Ask a pharmacist.

Glue ear (otitis media with effusion)

Glue ear is persistent fluid build up in the middle ear, with no signs of infection. Some children who get frequent otitis media develop a glue ear. It occurs because fluid in the middle ear does not drain out properly.

Symptoms include:

- Hearing loss
- Fever
- Runny nose
- Swollen glands.

Glue ear may lead to permanent damage and impaired language development.

Treatment

Glue ear can be treated by inserting tiny tubes (grommets) through the ear drum – ask a doctor.

Self care

Children with grommets should not get water in their ears. Water-repelling ear plugs may help.

Inner ear problems

Problems in the inner ear can affect hearing and balance. The most common cause of inner ear problems is infection, usually viral. Consult a doctor.

Related fact cards

- *Colds & Flu*
- *Pain Relievers*
- *Sinus problems*

For more information

Health/Insite – website www.healthinsite.gov.au

Consumer Medicine Information (CMI) leaflets – your pharmacist can advise on availability.

NPS Medicines Line – phone 1300 888 763 Monday to Friday, 9am to 6pm EST.

The Poisons Information Centre – in case of poisoning phone 131 126 from anywhere in Australia.

Pharmacy Self Care Support – phone 1300 369 772 and ask for the Pharmacy Self Care Field Officer.

Pharmacists are medicines experts. Ask a pharmacist for advice when choosing a medicine.

