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### Ear Infections – To Treat or Not To Treat? Part II

In last article, I recalled the excitement that physicians experience when they first diagnose ear infection. It seems that not all ear infections warrant antibiotic use. Sometimes the side effects or risks of intervening have to be taken into account. That is why in my opinion, properly treating ear infection is an *art*. Parents should not be dismissed home with just a prescription for oral antibiotics without a discussion about the child's infection and why a certain treatment is appropriate for it.

Not all ear infections are created equally. The “old school” thinking was that when you find an ear infection – you should treat it with antibiotics. Obviously, this is no longer the case. There are however factors, that help physicians in the decision making process.

1. **Fluid vs Infection** – in my opinion, this is the most important factor. Many physicians confuse infected ears with non infected ears that contain fluid. Having fluid in the ears is a common finding in children with colds. Due to the position and the small size of their Eustachian tubes, children with colds often have fluid in their ears. I like to describe the fluid as just an extension of the nasal discharge. We adults, seldom develop ear infections due to the large and slanted Eustachian tubes we have. Children however, may have fluid in the ears for a while after the cold is gone.
2. **Age** - ear infections in infants younger than 6 months should be treated with antibiotics according to the American academy of Pediatric Guidelines.
3. **Fever** - Children with an ear infection who also have fevers above 103 degrees Fahrenheit should be treated with antibiotics.
4. **Pain Level** - Children with extreme otalgia (ear pains), commonly have bullos ear infections. Their ear drum is stretched and “balloons out”. If these infections are not promptly treated – the Tympanic membrane could easily rupture. Although most ruptured ear drums heal nicely and the perforation actually relieves the pain as well, some perforated ear drums do not spontaneously close, leading to some hearing loss. There are some intricate ways to surgically repair these perforations, but due to the complexity of the procedure, ENT specialists do not rush to perform these surgeries. To



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sum it up – if your doctor diagnosed an ear infection and your child is in extreme pains – do not let your child suffer much longer!

5. **Hearing Loss** – all ear infection will cause a temporary hearing loss. Having fluid in the middle ear, obstructs the transmission of sounds into our inner ears. Most ear infections resolve in a 2-3 week timeframe. However, some children may have anatomical changes, allergies or enlarged adenoids that may prolong the time it takes to drain and clear their ears.

Therefore, if a toddler is noted to be delayed in speech, I am extra careful when it comes to the problem of middle ear effusion. I try and perform hearing tests at my office or at an audiology clinic to ensure that despite the fluid in the ears, there is no significant hearing loss.

Each child has a “window” of opportunity for his speech development. This time is very critical for his future abilities to communicate and excel academically. Many times, surgical intervention to drain fluid that has been in the ears for a while, results in immediate enhancement of their expressive and receptive speech.

So if your child’s speech is not up to par with his peers and you have a fridge full of antibiotics for his ear infections – please discuss the possibility of hearing loss with your pediatrician.

### **The art of medicine**

This article embodies why practicing medicine is still an art. Even treatment of a simple ear infection requires proper diagnostic skills and thorough investigation into a patient’s history and intellectual development. At times it may be challenging for both the parents and physicians alike. Ultimately however, we have to do our utmost as parents and physicians, to allow our kids to hear the sounds of life in their path to a bright and successful future.

Wishing you a Happy and Healthy Hanukka!  
David Elazar Simai M.D.