

## Childhood Health

**Julian Keel** looks at otitis media (middle ear infection) - a common ailment.

**Almost half of all children will have had at least one episode of otitis media before they're a year old. By three years old, two thirds will have had at least one such infection.**

Up to one third of all children will have six or more episodes before starting school and some can have up to twelve episodes per year.

Signs and symptoms range from pain, temperature, vomiting, irritability, tugging at the ear, a pussy discharge from the ear and hearing loss. Although it can also be asymptomatic – picked up only on routine ear examination.

Medical treatments include antibiotics, antihistamines, decongestants and, in chronic cases, surgery which involves a general anaesthetic and insertion of 'grommets' or ear tubes and in some circumstances removal of the adenoids (enlarged adenoids may block the Eustachian tubes - the tube connecting the middle ear to the throat, and cause the mucous build up to become sticky and glue-like, a condition known as glue ear).

There is little evidence of the effectiveness of these therapies and GP's in the UK are advised initially to prescribe only pain-relief in simple cases as the condition tends to be self-limiting.

Although no randomised controlled studies yet exist showing the effectiveness of chiropractic care for otitis media there are encouraging results from a pilot study carried out in the US, and certainly in my own experience it is a condition I have often treated with positive outcomes for babies and children alike. Parents have been very happy with not having to resort to another batch of antibiotics or grommets. Treatment involves encouraging lymphatic

and fluid drainage around the neck and throat and restoring spinal, jaw and cranial function that may have been affected by the birth process, by poor posture, or by grinding of the teeth that in turn may be causing poor drainage around the Eustachian tubes.



Identifying diet issues is also necessary. Early cow's milk consumption may predispose to otitis media. Other foods that also thicken the mucous such as orange juice, peanuts and peanut butter, bananas, wheat, sugar and additives are worth avoiding.

Feeding position is an essential thing to look at. In a study conducted in 1980, the practice of giving a child a bottle in bed was the primary factor associated with persistent fluid in the middle ear. This may be due to the shape of the Eustachian tube in children having a more horizontal position making it easier for fluid to back up and cause irritation and infection.

To address any weakness in immunity, I often recommend appropriate nutritional supplements in children above the age of one year, and encourage the use of probiotics from infancy – particularly if antibiotics have been used.

Otitis media, and other childhood illnesses and conditions such as asthma and bedwetting, are problems that can cause misery for children, parents and siblings, but which can be dealt with in an effective and gentle way with cranial and chiropractic treatment.

I hope parents will feel reassured that by taking a proactive approach and identifying the root cause of a problem, we can help keep our little ones happy and healthy.

A Richmond branch NCT member, Julian Keel is a registered chiropractor practising locally in South West London and offering chiropractic and cranial treatment for adults, babies and children. As well as an extensive sports injury and general rehabilitation background, Julian specialises in the care of the mother pre and post natally and the health of babies and children.