

# Acute Otitis Media (AOM)

## History

- fever
- earache
- otorrhoea
- lethargy/irritability / sleep disturbance
- Protracted +severe crying

## Diagnosis

Fullness or bulging of the tympanic membrane with dullness and reduced mobility  
Does not need to be red. Acute onset of symptoms

## Risk factors

Going to creche  
If first AOM < 6m  
If not breast-fed  
Passive smoking  
Cleft palate  
Downs  
Food allergies  
Drinking milk in prone position

## Examination

- examine the child in parents' arms in proper position
- well-maintained autoscopes
- visualize the eardrum

## Investigations

- AOM is a clinical diagnosis and so no investigations are required
- Tympanocentesis not routinely performed

## Treatment

- do **not** prescribe antibiotics as initial treatment (B evidence)
- delay antibiotics for 72 hours if not improved
- amoxycillin +/- clavulanic acid DIC
- Pain relief v. important
- **no** role for decongestants

## Pathogenesis

Preceding viral infection -> eustachian tube swelling -> Bacterial colonization (*Strep/Staph/Moxarella*)

## Serous OM

Post-AOM many will have glue ear for up to 3/12  
Lasts longer if Downs or cleft palate  
May lead to conductive hearing loss  
Few require grommets

## ACUTELY DRAINING EAR

- Usually indicates perforated tympanic membrane
- Need adequate pain relief
- oral antibiotics
- Re-evaluate after 48-72 hrs
- watch for mastoiditis, Bells palsy, intracranial extension

## References

**SIGN 66**  
diagnosis and management of otitis media in primary care  
2003  
SIGN update 2012

## TAKE HOME MESSAGES

Very common condition  
Often over-diagnosed  
Pain relief vital  
Delay antibiotics unless discharging ear  
Refer to ENT if >4 AOM episodes in 6m or if serous OM, over 3yo with hearing loss

**This algorithm has been produced by the National Paediatric and Neonatology Clinical Programmes. It is aimed at medical, nursing and allied health professionals working in both primary and emergency care settings.**

**Changes as recommended by QIP committee of the ICGP . All managed in primary care**

Revision number:	1.0	Document drafted by:	National Paediatric and Neonatology Clinical Programme
Date of Last Update:	21/1/13	Document Status:	Draft
Approval date:		Document approved by:	
Revision date:			