



Say what? Half of Brits think their children are ignoring them when they could actually be experiencing genuine hearing problems

When children are accused of ignoring their mums and dads, they may actually be suffering from the common childhood illness glue ear and not exercising 'selective hearing' as nearly half of UK parents (46%) seem to think.

New research conducted by Otovent, the only non-surgical treatment for glue ear, shows that only 3% of parents would think that their child had an undiagnosed hearing problem if they appeared not to hear them.

Medically known as otitis media with effusion (OME), glue ear is a build-up of sticky mucus in the middle ear resulting in differing degrees of hearing loss. Incredibly common, it is estimated that 80% percent of children will have had at least one episode of OME by the age of 10 years (1) and approximately 178,000 cases are diagnosed annually in children under 12 (2).

Most common in children with repeated colds or ear infections, glue ear usually produces little symptoms apart from fluctuating hearing loss but requires professional medical advice before it becomes too serious. Startlingly, despite the need for early diagnosis, only half of parents (52%) who suspected their child had a hearing problem would book an appointment with their doctor, almost a quarter (23%) would turn to the internet and a fifth (21%) would instead seek advice from teachers, family and friends.

More than a quarter of mums and dads polled by Otovent (28%) said their child had suffered from glue ear, but a tenth of parents didn't realise that glue ear and

other hearing difficulties affect a child's social skills (11%), confidence (13%) and learning (15%).

Persistent or fluctuating glue ear (3) may have adverse effects on a child's development and progress, with studies showing that in early childhood it is associated with lower scores for spelling and writing ability(4) whilst other evidence shows that it increases the likeliness of behavioural problems such as poor attention span, hyperactivity and neurotic behaviour(5).

UK parents appear to be divided over what action to take when their children are diagnosed with glue ear. Nearly a third (31%) said they simply waited for it to clear up on its own and did nothing whilst a shocking 42% would have surgery to insert grommets straightaway if their child was diagnosed and an operation was recommended.

While few parents realise there is an alternative, in February 2008 the National Institute of Clinical Excellence (NICE) produced guidance on managing glue ear for the first time(6) and recommended that during a three-month 'watchful waiting' period when hearing loss is tested before medical intervention is considered an auto-inflation device such as Otovent could be tried. Otovent is a special balloon which can be blown up through the nose to clear the tubes in the middle ear and studies have shown that auto inflation is an effective short-term treatment for children from the age of three years when regularly used under supervision(7).

Kathleen McGrath, children's nurse and regular on The Wright Stuff, says: "Glue ear is a very common condition among children in the UK affecting around 200,000 per year. Parents need helpful and accurate information to make decisions about their children's care. The website www.gluear.co.uk provides useful advice and options in treatment so that informed choices can be evaluated by those caring for affected children".

Seven-year-old Liam Stevens from Basildon, Essex, has suffered with serious hearing problems from the age of three and after being diagnosed with glue ear, underwent two operations to have grommets fitted. In order to prevent him having another operation, Liam's ENT specialist recommended trying Otovent instead. Mum Amanda says: "The transformation when Liam started using Otovent was unbelievable and his hearing is now above average in both ears. He's a different child now. Liam now plays the recorder and sings in the school choir, activities that were previously out of his reach. The treatment has been remarkable and I couldn't recommend Otovent enough to other parents whose children are experiencing hearing difficulties because of glue ear, especially before embarking on an operation to fit Grommets."

For more information visit www.gluear.co.uk

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(1), (5), (6) Surgical management of otitis media with effusion in children, Feb 2008, National Institute of Health and Clinical Excellence

<http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11928>

(2) National costing report: Surgical management of OME (February 2008)

(3) Resulting in a hearing loss of 25-30dBHL or greater

(4) Keles E, Kaygusuz I, Karlidag T, Yalcin S, Acik Y, Alpay HC, *et al.* Prevalence of otitis media with effusion in first and second grade primary school students and its correlation with BCG vaccination. *International Journal of Pediatric Otorhinolaryngology* 2004;68:1069–74.

(7) Stangerup S. E. *et al.* Autoinflation as a Treatment of Secretory Otitis Media. February 1992.

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Research (online survey) undertaken by:

- Mumsnet, January 2009, 1000 people
- All respondents were parents who had a child aged between 18 months and ten years inclusive

Notes to editors

- o The Otovent inflation devices are made of natural latex and they stretch as they are used (max 20 inflations per device). Each device should last for 3–4 days
- o Clinical data showing that Otovent is effective in 64% of cases where the course of treatment is correctly carried out

- Otovent is available free on prescription for a child less than 16 years of age and over the counter for the RRP of £6.97
- Otovent has been available in the UK since 1993 and gained prescription status in 2001
- Adults and children from 3 years of age can use Otovent
- Patients could begin using Otovent as soon as possible after the diagnosis of glue ear is made. Early intervention produces the best results