Useful Telephone Numbers

Bluebell ward, Lister Hospital Tel: 01438 284008

Children's Emergency Department, Lister Hospital

Tel: 01438 284333

Children's Day Services, Lister Hospital

Tel: 01438 286315

ENT Department, Lister Hospital Tel: 01438 314333, Ext. 5113 / 4118

ENT Admission Office (waiting list) Tel: 01438 286836 or 01438 286835

ENT Nurse Specialist (Monday to Friday, 8.30am - 6pm)

01438 314333, bleep 1028 Mobile: 07785 343359 or 07876 390290

Useful ENT website: www.entuk.org

In an Emergency:

Dial 999 and request an ambulance or attend the nearest A&E of the following hospitals unless away from home

Lister Hospital A&E (SG1 4AB) - 01438 784732

New QEII Urgent Care Centre, Welwyn Garden City - 01707 247549

Luton and Dunstable

Princess Alexandra Hospital, Harlow

Lister Hospital Coreys Mill Lane Stevenage, Hertfordshire SG1 4AB Tel: 01438 314333

www.enherts-tr.nhs.uk

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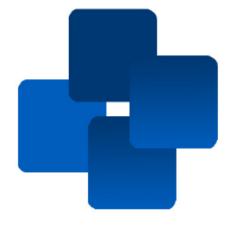


Patient Information

Grommet Insertion (Children)

Ear, Nose and Throat Department





Grommet insertion in children

'Glue ear' is also called 'otitis media with effusion' which means that the middle ear contains sticky fluid. This can affect hearing as parts of the middle ear cannot move freely, causing hearing loss. Grommet insertion is an operation for the treatment of glue ear or ear infection. Grommets are white tiny tubes which are inserted into the eardrum to equalise the pressure in the middle ear.



Procedure and anaesthetic

The operation is performed under a short general anaesthetic when the patient is asleep. It takes 10-15 minutes per ear. The surgeon makes a tiny hole into the eardrum and inserts the grommet into the hole - like a button in a button hole.

Outcomes

Once glue ear has been diagnosed and treated the outlook is very good. Some children with this condition have speech and language delays, however, following the operation most children catch up.

With a grommet in place, the ear usually heals normally and the child does not experience frequent earache.

There are two types of grommet. Most are not permanent and will usually be expelled naturally after 6-12 months. This is normal and your child will not be affected. There is another type that is sometimes used for recurrent cases which stay in longer.

Risks and complications

A complication of grommet insertion can be infection. In this situation your child may complain of earache and have runny, blood stained discharge coming from the ear. This can easily be dealt with by visiting your GP who will prescribe ear drops and occasionally oral antibiotics. There is a very small risk of grommets causing permanent damage to the ear. Sometimes the grommet falls out and the eardrum does not heal properly. This often happens in children who have had multiple grommet This is called a insertion. persistent perforation and can be repaired at a later date.

Post-operative care and advice

Once your child is fully awake after the operation, he/she will return to the ward. Once they feel comfortable and have had something to eat and drink, you

will be able to take your child home.

It is common to experience mild earache after the operation and you should give you child regular pain relieving medication such as Paracetamol or Ibuprofen according to the instructions on the bottle.

Your child has been given pain relief and can next have

Paracetamol at hrs and/or

Ibuprofen athrs

Your child's ear may ooze or bleed a little for a day or two after the operation. This is normal and should stop within a few days. You may clean any discharge that you can see from the outer ear with moistened cotton wool or tissue. Do not attempt to clean inside the ear at all.

You will need to take care during hair washing, bathing and showering. It is advisable to put a ball of cotton wool coated with Vaseline into your child's outer ear at these times. Do not insert anything into the ear canal.

Surgeons vary their instructions regarding swimming. Children **must not swim** for one week after surgery. Your surgeon will discuss this with you, after which

your child may swim. Some will need ear plugs.

Care at home and time off school

This is a day case procedure requiring one or two days off school; providing your child is pain free and well.

Follow-up

A follow-up will be arranged in approximately six weeks to check the patency of the grommet and to do a hearing test.

When to seek further medical advice

You should take your child to see a doctor if he/she experiences any of the following:

- Bleeding or discharge from the ear(s).
- Severe pain that does not subside after giving pain relieving medication, such as Paracetamol or Ibuprofen.
- A fever that does not respond to Paracetamol.

Alternative Treatments

Watchful waiting - Many children's glue ear will recur rapidly so further grommets are usually only considered in cases where the symptoms persist. In older children who can blow up a balloon, an Otovent balloon, which is inflated by the nose may be successful or, if the only symptom is hearing loss, a hearing aid may be used.