



East Sussex Healthcare
NHS Trust

Glue Ear - Information for parents



What is glue ear?

For ears to work properly the middle ear needs to be kept full of air. The air travels through the Eustachian tube which runs from the middle ear to the back of the throat. In children this tube is not as vertical or as wide as it will be when they get older. This means that it often doesn't work as well, particularly at times of coughs and colds. If the Eustachian tube is not functioning well, air cannot enter the middle ear. This causes the cells lining the middle ear to produce fluid. This is a runny liquid which can get thicker over time.

How does glue ear affect hearing?

With fluid blocking the middle ear, it becomes harder for sound to pass from the outer ear through to the inner ear, making quieter sounds more difficult to hear.

How can glue ear affect children?

Changes in your child's behaviour, such as becoming tired and frustrated, lack of concentration, preferring to play alone and not responding when called can be signs of poor hearing. These signs can often be mistaken for not listening or poor behaviour. A prolonged period of time with reduced hearing can affect children's speech development. Children with glue ear may also struggle at school so it is important to let your child's Teacher know if your child has glue ear.

How is glue ear tested?

An Audiologist or Nurse will examine your child's ears. A further quick and painless test called Tympanometry will also be performed. This test measures how well the eardrum can move. If there is fluid in the middle ear, the eardrum will not work properly. A graph called a tympanogram will show the results straight away. A hearing test should be performed to check whether the fluid is affecting your child's hearing, and by how much.

What happens next?

The Audiologist or Nurse will explain the results of all the tests and discuss the best way to treat your child. It is nationally recommended that children with glue ear are monitored with repeat tests at least three months apart. For most children the glue ear will clear up in this time. If it has not, a referral to an Ear, Nose and Throat Specialist for further assessment may be discussed with you.

Sources of information

NHS Choices
www.nhs.uk

National Deaf Children's Society
www.ndcs.org.uk

Please feel free to contact the Paediatric Audiologists or Specialist Nurse if you have any questions or concerns:
Tel: 01323 444187

Paediatric Audiology

Avenue House, The Avenue, Eastbourne. East Sussex. BN21 3XY

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Important Information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team:

Tel: (01323) 417400 Ext: 5860
or by email at:
esh-tr.patientexperience@nhs.net

After reading this information are there any questions you would like to ask?

Please list below and ask your nurse or doctor.

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department:

Tel: (01424) 755255 Ext: 2620

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