

Faxnotes

Mar. 13, 2006

MEDICAL UPDATE

Common indicators for ear tubes referral

The usual indications for ear tubes include frequent ear infections, persistent middle ear effusions or hearing loss. The number of infections that have been shown to warrant tube placement are 3 to 4 episodes in 6 months or 5 to 6 in a year. A unilateral middle ear effusion for six months or bilateral middle ear effusions for three months are unlikely to clear spontaneously. At any time that a hearing loss is documented or one of the above occurs in the context of speech or language delays, tubes should be considered. For patients with recurrent otitis media and a penicillin allergy, choices for therapy are limited, particularly if they also have a sulfa or cephalosporin allergy. This patient group should also be considered for tube referral sooner than other groups of children.

Otolaryngology

The emergence of multiple resistant organisms is a recent development in the pathogenesis of otitis media. It is well known that resistance in *S. pneumoniae* is increasing. But in addition, with widespread use of a pneumococcal vaccine, infections are more commonly caused by *H. influenzae* or *M. catarrhalis*. More *H. influenzae* and most of *M. catarrhalis* is beta-lactamase producing. These facts account for the increasing number of amoxicillin treatment failures. This is part of the reason for the recent change in the recommendations for first-line therapy to high-dose amoxicillin or amoxicillin/clavulanate. In the face of an episode of repeated treatment failures, one might consider earlier tube referral than the recommended number of episodes might dictate.

Tubes will decrease the number of infections, but possibly not to zero. Should infections occur with functioning tubes, the ears will drain. However, the option exists to use otological antibiotics to treat the infection, eliminating the frequent sequelae of oral antibiotics such as diarrhea and rashes. Otologicals have not been shown to contribute to the development of resistance. Tubes will relieve the pain and pressure that the child often experiences with an ear infection. They also decrease the time that the child will spend with fluid in the ears, and therefore time with hearing loss. Functioning tubes will markedly decrease the chance of a complication of otitis media, namely intracranial complications.

For more information, contact Amy Brenski, M.D., at 214-456-2386 or amy.brenski@utsouthwestern.edu.

CONTINUING EDUCATION

Child Abuse Prevention Symposium

The Child Abuse Prevention Symposium will be held from 8 to 10 a.m. on Friday, April 7, in the Children's auditorium. The two-hour symposium will cover topics such as child abuse trends, screening and recognition in primary care, child abuse triggers and primary prevention. The symposium is being hosted by The REACH team, the Children's Injury Prevention Program and the Children's Advocacy Department. For more information, please contact Paula Yuma at 214-456-7936 or at paula.yuma@childrens.com.

PEDIATRIC GRAND ROUNDS

Wednesdays at 8 a.m. in the Children's auditorium. For CME information, contact the UT Southwestern office of continuing medical education at 214-648-3705.

March 22 "Inner-City Asthma," William Neaville, M.D., Assistant Professor of Pediatrics, Division of Allergy & Immunology; Assistant Professor, Internal Medicine, UT Southwestern Medical Center

March 29 "Abnormal Vaginal Bleeding," Ellen Wilson, M.D., Clinical Associate Professor of Obstetrics and Gynecology, UT Southwestern Medical Center

April 5 - FASHENA LECTURE

"Granulomatous Diseases: Taming the Granuloma" Kathleen E. Sullivan, M.D. Ph.D., Associate Professor, Department of Pediatrics; Chief, Division of Allergy and Immunology, The Children's Hospital of Philadelphia, Philadelphia, PA.

April 12 - *"Red Book® Updated: A view of the future"* Larry K Pickering, M.D.,
F.A.A.P., Senior Advisor to the Director of the National Immunization Program;
Executive Secretary Advisory Committee on Immunization Practices, Centers for
Disease Control and Prevention, Atlanta, GA.

Main Number (214) 456-7000	 	Pharmacy Consult (214) 456-6209
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