

Ear Discharge after Grommets

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If your child has had grommets placed by an ENT North surgeon, we strongly encourage you to contact our practice as your first point of contact if they develop ear discharge. We have already cared for your child and will take responsibility for continuing their care until their ears are healthy and the discharge has stopped.

Why does ear discharge happen after grommets are placed?

- Ear discharge following the placement of grommets is most commonly due to a viral upper respiratory tract infection (a cold). It is more common in younger children, and during winter when colds are more common. For young children in childcare, discharge can occur at almost any time of year given this combination of risk factors.
- Less commonly, discharge may occur following swimming. Current evidence suggests that this is not common, and routine use of earplugs is generally not required. If *your* child routinely gets ear discharge after swimming, consider using ear plugs to prevent this.
- Occasionally the grommet becomes covered by a thin layer of microscopic material called a biofilm, which becomes the source of that recurrent infection.

What to do if discharge starts

If your child has developed ear discharge during a cold, the discharge is clear or yellow and your child is otherwise well, it will often settle within two days without active treatment. You can gently clean the discharge that you can reach.

- Use a moist face washer, handkerchief or tissue.
- Only clean the area at the junction of the ear canal and the 'bowl' of the ear with this, and any dried mucus on the external skin.
- You can use tissue spears (described below) to clean inside the ear canal itself.
- Do not put cotton buds or other hard objects into the ear canal.

When should I contact ENT North or my GP?

Please contact ENT North for advice if:

- The discharge has continued for more than two days.
- The discharge looks bloody.
- The discharge looks like pus.
- Your child appears to be experiencing significant pain or distress related to their ear discharge.
- If the discharge starts again soon after completing a course of topical drops or oral antibiotics, please contact ENT North regardless of who has prescribed your treatment.

Treatment of Persisting Discharge after Grommets

The usual first-line treatment for persistent discharge following grommet placement is **thoroughly cleaning the discharge out of the ear canal combined with topical eardrops**. Treatment guidelines recommend using a drop containing the antibiotic ciprofloxacin as first line drops.

- Oral antibiotics are generally not required if your child is otherwise well.
- Oral antibiotics may be considered if there are other concerning features, such as:
 - Severe pain
 - High fever
 - Other signs of significant systemic illness
- Either your GP or one of our surgeons can prescribe ear drops for you if needed.
- Please see the video on our website demonstrating how to instill ear drops effectively (found under the 'Videos' tab).

Reasons that the Discharge might Continue

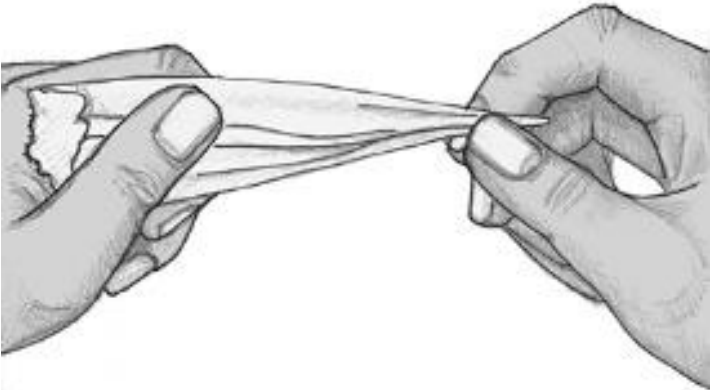
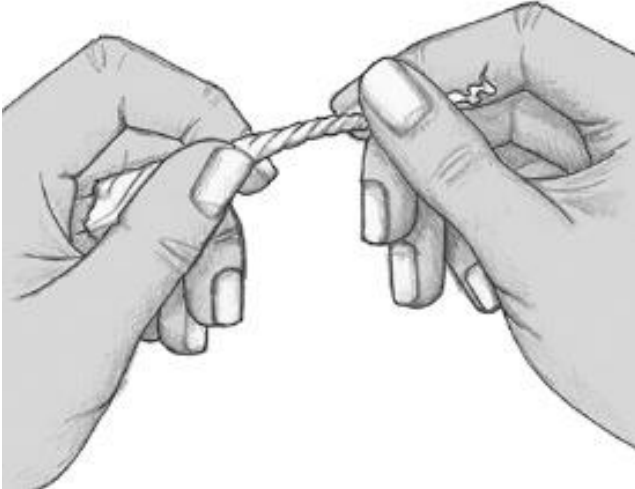
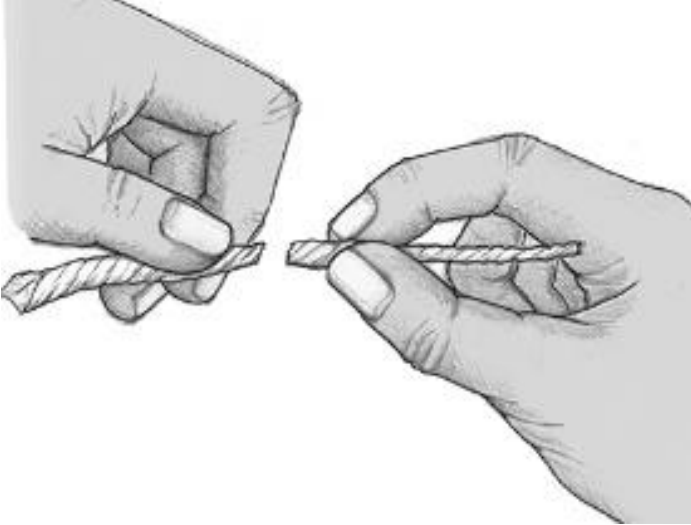
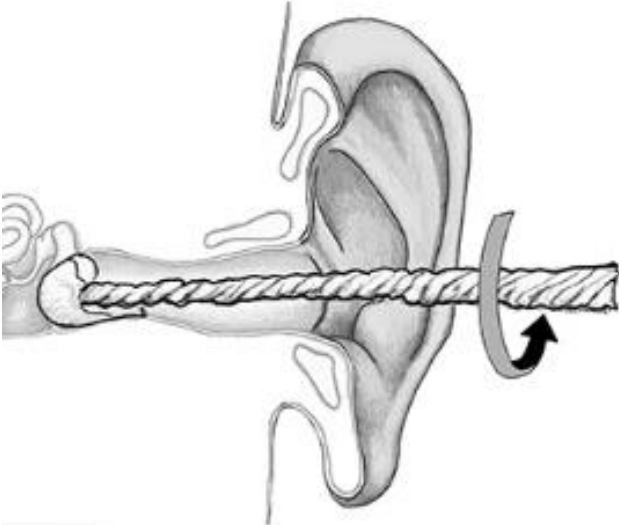
- Children unfortunately continue to get colds, so might be rolling from one to the next with discharge on each occasion.
- Water inside the ear canal might allow an infection to continue. While your child's ear is discharging and for a week after it finishes, do not put their ear underwater in a bath or swimming pool. They can have a bath or shower during that time.
- The discharge might be caused by a fungal infection, rather than a bacterial infection, or by a combination of both. Standard first-line eardrops generally do not effectively treat fungal infections.
 - If the discharge continues, we recommend doing an ear swab to identify the underlying infection. This can be organized through ENT North or with your GP. If your GP arranges the swab, we recommend specifically requesting **both bacterial and fungal cultures**, as fungal cultures are not routinely performed for ear swabs.
- In a small number of cases, ear discharge can begin after a long period of good ear health, as the eardrum starts to push the grommet out. A small amount of tissue from the developing new eardrum can become caught around the edge of the grommet, forming a small lump that can resemble a mushroom. This is called an 'eardrum granuloma' (see photo). This tissue can bleed easily and may result in bloody painless discharge from the ear.
- If a biofilm has formed, we may need to take out the affected grommet and replace it at a second operation.
- Sometimes the grommet has come out, and after the ear drum has healed over another infection happens and causes an ear drum perforation.



Granuloma related to a grommet

Tissue Spear Cleaning Technique

This is the most effective way to clean the ear canal before drops. We would like to acknowledge and thank our colleagues at the Remote Primary Health Care Network for developing and publishing the instructions below.

1. Take a tissue, hold in one hand and twist from corner. 	2. Use thumb and first finger of both hands to twist until spear is tight (do not roll — rolled tissue is too thick and can't be put far enough into ear canal). 
3. Break off tip (too floppy to use) and the other end of spear. The spear should be about as long as your thumb. 	4. Push tissue-spear into ear with slight twist as you go. 
▪ Stop pushing when tissue stops going in (will be an inch or so in most cases). Don't worry about pushing the spear in too far; tissue paper is soft and won't do any damage to the ear drum. ▪ If possible, leave the spear in place for a few minutes to soak up pus. ▪ Remove slowly and throw away. ▪ Repeat with new spears until spear comes out dry OR your child stops co-operating. At first this may take several spears but will get quicker as the discharge stops. ▪ When ear is dry, put in ear drops as directed.	
Online resources https://remotephmanuals.com.au/document/37394.html https://www.youtube.com/watch?v=joymXXYo0Zw	