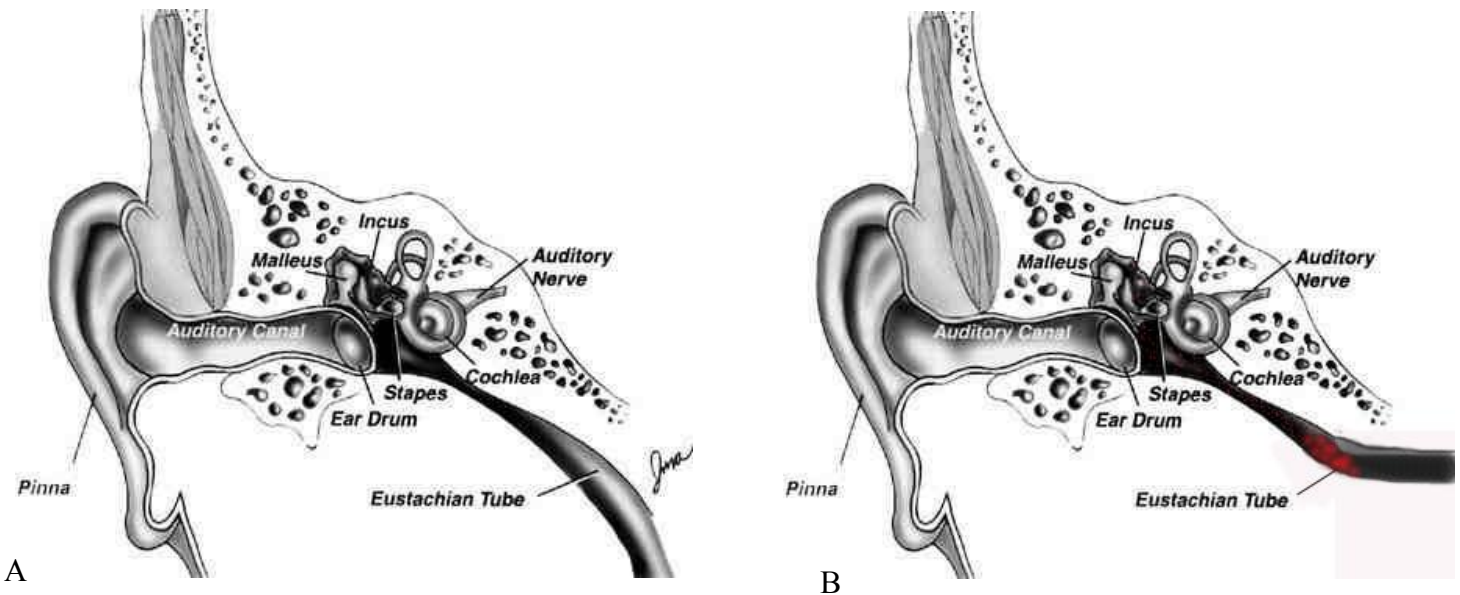


Pediatric Ear Infections: Why so common?

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January 2008

Ear infection or Acute Otitis Media (OM) is the most common reason parents take their children to see a physician. It is most commonly caused by inflammation or infection behind the tympanic membrane or ear drum. This puts pressure on the ear drum eliciting pain.

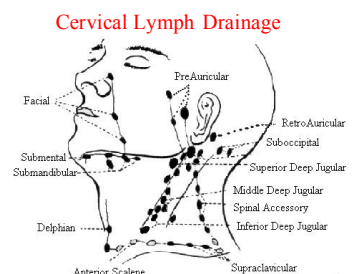
Many parents wonder why children are so prone to middle ear infections. There are several reasons but one of the most clear anatomical reasons can be demonstrated in the illustrations below. An adult ear and Eustachian tube clearly drains downward into the throat (illustration A). In an infant and young child (illustration B) the tube does not drain so easily with gravity due to the horizontal position of the Eustachian tube. Commonly the Eustachian tube will have even *less* drainage than shown in illustration (B). This creates a 'trap' for bacteria and 'backs up' any infection behind the tympanic membrane (aka ear drum) confining the pressure in the middle ear...ouch!



It is easy to reduce the chances of Otitis Media through chiropractic with neck adjustments and yes, an ear adjustment.

- 1) Chiropractic adjustments help open and drain the Eustachian tube.
- 2) Chiropractic adjustments boost the body's natural immunity to infection.¹
- 3) Chiropractic adjustments assist in lymph drainage - moving bacteria and infection away from the head for proper disposal.

¹ *East West Nov. 1989* – Ronald Pero, Ph.D., Chief of cancer prevention at New York Preventative Medicine institute. – Study found chiropractic patients had 200% great immune-competence.



Other things to consider:

“By the age of three, over two thirds of all children have had one or more episodes of Otitis Media or middle ear infection. There are numerous problems with antibiotic usage of children with ear infections such as: allergic reactions, GI upset, destruction of the gut’s intestinal flora leading to yeast proliferation and antibiotic resistance. Tubes in the ears have a 98% recurrence of infection within two months while 25% of those with tubes suffer hearing loss years later.”²

1. “Treatment of acute Otitis Media is the most frequent indication for prescribing antibiotic in the pediatric population. Evidence suggests there is marginal benefit from antibiotics. The ‘wait and see’ approach to acute Otitis Media empowers families by using a shared decision-making model will reduce the use of antibiotics and will decrease resistance to antimicrobials.”³ *(The wait and see model is when the pediatrician gives a prescription for antibiotics then has the parents wait 48 hours before filling the prescription. This is to see if the ear infection begins to clear on it’s own.)*
2. *Ear infections are actually less common in nursing babies.* The risk of developing Otitis Media in an infant is two times greater if a pacifier is used and *five times greater if bottle fed* or attending a day care facility.⁴
3. Babies who are exposed to large quantities of dairy products or formula early in life are far more prone to Otitis Media. This is due to the pro-inflammatory and probiotic nature of dairy products. I know, they taste good but they challenge our immune system whether we notice it or not.⁵
4. **A comparative study of the health status of children raised under the health care models of chiropractic and allopathic medicine.** The study found more than 80% of the medical children suffered from at least one bout of Otitis Media while only 31% of the chiropractic children were so reported.⁶

Another study of this kind found 8 out of 10 children of medical doctors were prescribed and used antibiotics to treat their Otitis Media. 7 out of 10 experienced a recurrence of Otitis Media resulting in another prescription. In contrast, only 3 out of 10 children of chiropractors received a prescription and used antibiotics to treat their Otitis Media. This actually correlates well with the newer study suggesting the “wait and see” approach in an effort to reduce the early use or excessive use of antibiotics.

In closing, there are times when antibiotics are necessary. Thank goodness we have them for those extreme cases. As these studies show (as well as the 200 others I reviewed but didn’t reference) most cases of Otitis Media are self limiting. I encourage everyone to use good parental judgment and only give your child antibiotics under the most severe of circumstances with the professional supervision of your MD.

² *Chiropractic and Spinal Research*, 2000, 92-93; Ted Koren, DC

³ *Current Opinions in Pediatrics*, 2008 Feb; 20 (1):72-8

⁴ *Pediatric dentistry* 1999 Jul-Aug;21(4): 255-60 Jackson JM, Mourino AP

⁵ <http://www.shetlin.com/articles/Milk.pdf>

⁶ *Journal of Chiropractic Research* Summer 1989 Van Breda, Wendy M. And Juan M