

Did you know?

The latest from the field of otolaryngology

Ear Infections – A Common Problem

Ear infections (otitis media) are amongst the most common and sometimes serious healthcare problems in the United States and especially in second and third world countries. Among other causative factors, genetically induced eustachian tubal dysfunction remains the most important cause.

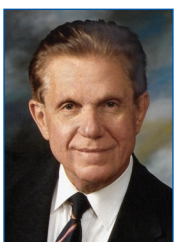
For example, more than 90% of all children will have acute otitis media (ear infection caused by bacterial infection) before the age of five. In addition, 10% of all children have chronic otitis media and will develop hearing losses due to otitis media with effusion (OME – which means fluid – mucoid or serous in the middle ear space behind the ear drum). I have designed and developed various Paparella ventilation tubes (used throughout the world) which when used properly ameliorates or improves the chronic otitis media and restores hearing.

Ear infections occur not only in children but are common in adults as well. I initiated the first NIH sponsored interdisciplinary multi million dollar program grant to study the “pathogenesis of otitis media.” The definition of pathogenesis includes the cause, how the disease develops, which leads to the pathology. The pathology can cause deafness, drainage, pain, dizziness and sometimes serious complications involving the brain. I also developed one of the two largest human temporal bone pathology laboratories in the world whereby patients with ear diseases can bequeath their temporal bones (ears) for scientific study.

From this research many improved ways of diagnosing and treating otitis media have evolved. I mention a few here:

1. We found that otitis media such as OME in childhood can occur along a continuum leading to chronic otitis media and complications in adults, such as atelectasis (collapse of the ear drum), damage to the ossicles (hearing bones) or to chronic otitis media and chronic mastoiditis whereby fluid pathology in childhood becomes tissue or tumor type growths in children or adults such as cholesteatoma, granulation tissue or cholesterol granuloma.
2. These latter patients require surgery (called tympanoplasty and/or mastoidectomy) to eradicate the disease and retain or restore hearing. Here we have developed flexible surgical techniques based on the pathology and the anatomy which has benefited many patients.
3. We also discovered a new disease namely, chronic silent otitis media, in which the disease hides behind an intact tympanic membrane.
4. Another research finding which helps patients is middle ear/inner ear interaction, which means infection in the middle ear can spread into the inner ear and cause nerve deafness or dizziness.
5. A new conservative operation called intact bridge tympanomastoidectomy (IBM)
6. A variety of techniques have also evolved to better diagnose and treat otitis media

To conclude, research has led to new methods of diagnosis and treatment for the various forms of otitis media which has helped thousands of patients. My colleagues and I continue to treat many hundreds of patients of all ages each year who have benefited from our methods and experience.



Dr. Michael Paparella, founder of Paparella Ear Head & Neck Institute, is a renowned expert in the field of otolaryngology, having served as Chair of the University of Minnesota's Department of Otolaryngology, authored over 600 scientific publications and 60 books, and trained more than 300 ENT physicians.

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