A Study on Ventilation Tube Therapy for Chronic Otitis Media with Effusion in Children

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Objectives: To perform ventilation tube therapy for chronic otitis media with effusion in children, to investigate how the incidences of recurrence and tympanic membrane perforation varied with duration of placement, and to determine the most appropriate duration of placement.

Methods: Using a questionnaire survey in clinics after follow-up, we studied 119 ears 74 children with chronic otitis media with effusion, undergoing ventilation tube therapy between January 2007 and December 2012.

Results: The duration of tympanostomy tube placement was 444 days on average, and recurrence was seen in 5 cases. There was no significant difference in the rate of improvement between patients undergoing adenoidectomy and with no adenoidectomy.

Conclusion: It was thought that 500 days or more were desirable for tube placement and that an adenoidectomy should be undertaken concomitantly wherever possible. A future study should be designed to examine the long term effect. Our results suggested that a high risk of the recurrence was associated with congenital anomaly or retraction within one year after the insertion.

Keywords: ventilation tube, children, tympanostomy

References

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The duration of tympanostomy tube placement

Comparison of the hearing ability in the observation period

Comparison of the hearing ability according to the method
TB: ventilation tube therapy
AT: adenoidectomy
TE: tonsillectomy