

PRINCIPLES OF MIDDLE EAR SCREENING IN PRESCHOOL CHILDREN

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Introduction. Otitis media (OM), the most common disease in children, often has asymptomatic evolution to chronic forms, provokes complications. Hearing loss, the most important symptom of OM, in small children is not evident for parents. Ear pain, fever and other symptoms of acute infection are not characteristic for majority of OM cases. Therefore parents address to doctor on a late stage of disease when chronic changes of middle ear are already stabile. The negative evolution of middle ear problems can be predicted and prevented if the disease is diagnosed on time.

Objective: The aim of this study was to elaborate the principles of middle ear screening in children with recurrent somatic pathology and healthy children.

Material: Children at the age between 1 and 7 years were divided into 2 groups: Group R with respiratory pathology and Group G with gastrointestinal pathology. Healthy children were included in Group H.

Methods: Tympanometry and otoscopy were performed every three months during 1 year. Complete audiological assessment and otomicroscopy were carried out in children who failed the screening tests during 6 months.

Results: We diagnosed OM with effusion in 61 % of ears from Group R, in 22 % of ears from Group G and in 8 % of ears from group H. It became chronic in 32 % of OM ears from group R, in 14 % of OM ears from group G and in 4 % of OM ears from group H. Recurrent acute OM was registered in 14 % of ears from group R, in 21 % from group G and in 2 % from group H. Chronic and recurrent forms of OM were correlated to respiratory tract infection-prone children, aged younger than 5 years of and sinusitis. These groups of patients received comprehensive diagnostics and intensive treatment, including the surgical one.

Conclusions: Screening revealed high incidence of OM with effusion in children. Middle ear monitoring is important for children with recurrent somatic pathology. High rate of OM chronicity was predetermined by somatic pathology. Medical treatment in such cases was not effective. In healthy children OM was a relatively rare, temporary and benign condition. For diagnostics of chronic and recurrent OM is necessary to introduce the monitoring of middle ear status in children with recurrent somatic pathology.