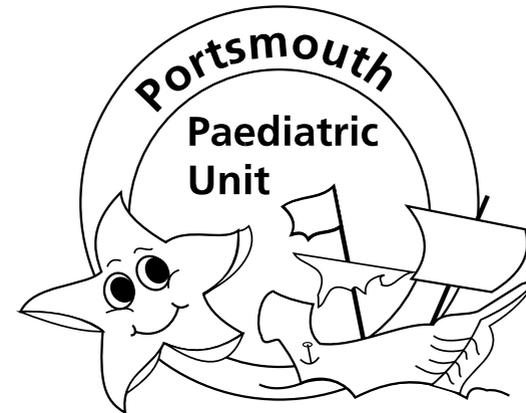


## Grommet Insertion

Some details about your child's ear operation



Shipwreck Ward  
Queen Alexandra Hospital, Cosham  
Tel: (023) 9228 6391

### Specialist Support

If you require this leaflet in another language, large print or another format, please contact the Health Information Centre Tel: (023) 9228 6757, who will advise you.

### **Why does my child need grommets?**

Fluid has built up in your child's middle ear because the Eustachian tube which usually drains fluid through to the back of your child's nose, has become blocked.

This fluid is stopping the eardrum letting the sound through properly and is causing your child's deafness. This is often known as 'Glue Ear' because the fluid is thick and sticky.

Glue ear is the commonest cause of mild deafness in school children. About 1 in 5 of all children suffer from this in their early years.

### **Are there any alternatives?**

You can leave things as they are, and the fluid may drain away given time. This could take months or years. The deafness will continue and may hold your child back in many ways. Your child may get serious middle ear infections during this time. Tablets, medicines, nose drips and inhalers will not help.

### **What does the operation consist of?**

Your child will have a general anaesthetic and will be completely asleep.

The surgeon shines a very fine microscope down your child's ear tube and makes a tiny cut in the eardrum. A very fine sucker is put through the hole and the fluid is drawn out. The hole in the eardrum is then plugged with a tiny plastic tube called a grommet. The grommet lets air pass from the ear tube through the eardrum and into the middle ear. Any fluid in the middle ear will now just dry up.

Because your child will be asleep, no pain will be felt during the operation. The operation can be done as a 'day case'. This means that your child comes into hospital on the day of the operation, and goes home the same day. We can do both sides at the same time, if needed.

### **What to do before coming into hospital**

You and your child may be asked to attend the ward the week before the operation is planned. This gives you the opportunity to have any questions answered by a qualified nurse/doctor. The doctor will assess your child to make sure they are fit enough to have surgery. A consent form needs to be signed at this time, so it is important that you or a legal guardian accompanies your child to the clinic.

Also, your child's stomach needs to be completely empty before the operation in order to have a safe anaesthetic. You will be sent instructions explaining when to give your child their last food and drink with your appointment to come into hospital.

### **After the operation**

#### **Pain**

There is very often no pain in the ear after a grommet operation. The grommet itself will cause no discomfort in the ear. If your child does have some earache after the operation, the nurses will give some medicine to take the discomfort away.

#### **Leaving the ward**

After an hour to two on the ward, your child will be well enough to go home. Usually we like your child to have something to eat or drink before leaving.

Before you leave the ward, we will give you an appointment to bring your child back to the ENT (Ear, Nose and Throat) Outpatient Clinic for the doctor to check the grommet. They will make sure it is working properly.

#### **At home**

The types of painkillers we advise are paracetamol (Calpol) and Nurofen for children.

## **What happens to the grommets?**

With the grommet in place, the fluid will clear from behind the eardrum within 6-8 weeks. Once the fluid has cleared, your child should be able to hear normally.

The grommet stays in the eardrum for 6-18 months.

As the fluid problem gets better, the hole in the drum heals and squeezes the grommet out into the ear tube. In some children the grommet comes out sooner, and in others they stay in longer. Sometimes the grommet has to be taken out with a small operation, if it does not come out by itself.

Your child will be seen regularly in the outpatient clinic after the operation. The doctor will check that the grommet is in place. He will test the hearing to make sure that it is returning to normal.

## **Special Instructions and Precautions**

### **Keep the ears dry**

- Do not allow water to get into the ears when your child is taking a bath or when washing your child's hair. Protect the ear by placing a piece of cotton wool, coated in Vaseline in the ear
- There should be no swimming for 6 weeks
- Your child must not have the ear syringed if there is a grommet. It would be very painful and could cause serious infection in the ear

## **Are there any problems with grommets?**

If your child follows the advice listed in this leaflet, the grommet is unlikely to cause any problems.

Occasionally children notice a popping or clicking in their ears. This is not harmful and you should not worry about it.

If your child gets a runny ear, it probably means that germs

have passed through the grommet and have caused an ear infection. You should go to your doctor who will probably give antibiotics. If the ear continues to run, he will arrange for your child to be seen in the ENT Outpatient Clinic.

In a few children, the ear can be a bit runny without anything serious being wrong. We will be able to reassure you about this in the clinic

When the grommet comes out, there will be a scar left on the eardrum. It will not make any difference to your child's hearing.

In a very small number of children, the small hole in the eardrum does not quickly seal up when the grommet comes out. Given time, most close on their own without any treatment. A few need to be closed with another operation.

The majority of children never have any further trouble. If the fluid comes back, we need to put a grommet in again for a time.

## **School**

Your child will be fit to go back to school the second day after the operation.

## **Further Information**

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

Tel: 0845 4647

## **How to comment on your treatment**

We aim to provide the best possible service and staff will be happy to answer your questions. However, if you have any concerns you can also contact the Patient Experience Service on 0800 917 6039 or E-mail [portsmouthhospitals.patientexperience@porthosp.nhs.uk](mailto:portsmouthhospitals.patientexperience@porthosp.nhs.uk)

### **Consent - what does this mean?**

Before any health professional examines or treats you they must have your consent or permission. Consent may be implied (e.g. offering a wrist for taking a pulse) or written (where you sign a form agreeing the treatment/operation). Young people are presumed to be able to give consent depending on their maturity and the nature of the decision.

Where a child is not competent to give consent, only a person (or body) with parental responsibility may consent on the child's behalf. More detailed information is available [www.dh.gov.uk](http://www.dh.gov.uk)

### **Information we hold about you and your rights under the Data Protection Act**

Please refer to the booklet 'Your Healthcare Information – Your Rights! Our Responsibilities!' for further guidance.

### **Notes:**