



# WellnessOne Newsletter

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## **New Study Shows Antibiotics Have Little Impact on Child Ear Infections**

*Reprinted from Mercola.com*

Giving children antibiotics when they get ear infections doesn't do much to speed their recovery. What's more, it raises the risk of side effects.

A study found that 80 out of 100 children, if given only medication to reduce pain or fever, would recover from an acute ear infection within a few days. If they were given antibiotics instead, the number would rise only to 92 -- and 3 to 10 of the children would develop a rash, while 5 to 10 would develop diarrhea.

According to CNN:

"Using antibiotics only when absolutely necessary may allow continued use of antibiotics for future generations, because overuse of the drugs is contributing to antibiotic resistance ..."

### **Sources:**

» [CNN November 16, 2010](#)

» [Journal of the American Medical Association November 17, 2010; 304\(19\):2161-2169](#)

### **Dr. Mercola's Comments:**

Millions of children visit doctors for ear infections each year. This happens to be the most common reason why kids are prescribed antibiotics. Yet, new studies suggest these drugs do virtually *nothing* to help most kids recover faster.

In the latest study, 80 out of 100 children recovered from ear infections in a few days without antibiotics. When the drugs were given, the number of kids who recovered rose by only 12 children, plus an additional three to 20 would also develop side effects related to the antibiotics, such as rash or diarrhea -- largely canceling out the almost non-existent benefit.

While one of the most common types of childhood ear infections, acute otitis media, may be caused by bacteria, it can be caused by a virus too, which won't be impacted by antibiotics.

Another type, otitis media with effusion, or fluid in the ear, is also caused by a virus, making antibiotics useless for this type of ear infection as well.



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## Doctors Were Warned to Stop Prescribing Antibiotics for Ear Infections Years Ago

Both the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians have recommended since 2004 that doctors hold off on prescribing antibiotics for ear infections, at least initially.

But even as the number of certain types of ear infection cases have decreased in recent years, the number of antibiotics prescribed have held constant. As the [American Academy of Pediatrics states](#):

*"While the number of office visits for otitis media with effusion - middle ear fluid - (OME) have decreased over the past decade from 25 million in 1990 to just 16 million in 2000, the number of antibiotic prescriptions to treat AOM has remained constant. At the same time, concerns about the rising rate of antibiotic -- or antibacterial -- use and resistance have emerged."*

AAP recommends that doctors give parents the option of letting their children fight the infection on their own for 48-72 hours, only starting antibiotics if the symptoms do not improve.

Yes, despite this warning and studies that came out over a decade ago saying the routine use of antibiotics for pediatric ear infections [produces little health benefit](#) while contributing to the spread of drug-resistant bacteria -- the drugs are still widely over-prescribed for this purpose.



### Why You Should Think Twice Before Giving Your Child an Antibiotic

It's easy to believe that one round of antibiotics won't hurt your child.. In fact, many believe it's absolutely necessary for nearly all infections, especially for those in their children.

But bacteria are rapidly growing accustomed to this antibiotic exposure, and they're quickly developing resistance. Antibiotic-resistant infections now claim more lives each year than the "modern plague" of AIDS, and the U.S. health care system spends nearly \$2 billion a year to treat these drug-resistant bacteria.

As long as we continue using potent antibiotics for minor infections or those caused by viruses, this trend of creating ever more resistant strains of infections will continue.

Keep in mind that, according to a large meta-analysis, the health risk from [over-use of antibiotics is also a very personal one](#), as opposed to simply raising the occurrence of antibiotic resistance in the general population over time.

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Whenever you use an antibiotic, you're increasing your susceptibility to developing infections with resistance to that antibiotic, resistance that can last up to a year -- and you can become the carrier of this resistant bug, and spread it to others.

In fact, a 1997 JAMA study found that frequent use of antibiotics for common ear infections [raises risks that children will harbor drug-resistant bacteria](#) during subsequent illness. The researchers found that children whose previous ear infections were treated with antibiotics had a rate of Ampicillin (amoxicillin)-resistant bacteria that was three times higher during subsequent ear infections.

In extreme cases, deaths from drug-resistant meningitis have been linked to built-up antibiotic resistance traced to previous treatment for ear infection.

### What Should You do if Your Child Gets an Ear Infection?

First, watchful waiting is a solid strategy before asking your doctor for a prescription. The majority of kids will get better in 48-72 hours with no antibiotics necessary. During this time, you can try the following solutions, which work remarkably well in treating acute ear infections:

- **Make garlic ear drops.** Ear drops that include extracts of garlic may [help reduce the pain of middle-ear infections](#) in children. You can make your own at home by crushing a clove of FRESH raw garlic and dissolving it in some olive oil. Put a few drops of oil in the ear canal, as long as the ear drum is not perforated.
- **Use breast milk for ear drops.** If you have access to breast milk, put a few drops of breast milk in the ear canal every few hours. This usually works to clear up the infection within 24 to 48 hours and is far safer, less expensive and a better solution than putting your child on antibiotics.
- **Apply a poultice.** Application of warmth behind the ear can be used to mobilize the post-auricular lymph chain and vasculature and to draw congestion away from the inflamed area of the middle ear.



To do this, heat half of an onion in a toaster oven for a few minutes, until it is warm but not intolerably hot. You could test it by applying to your own ear or inner forearm for several seconds. Next, wrap the onion in cheesecloth or thin dishcloth, and apply the largest side (the cut side, for maximum surface area) to the area just behind the ear.

If your child is not improving or is getting worse after 72 hours, then antibiotics may be required in some severe cases. Make sure you are working with a health care practitioner who is aware of the risks of antibiotic overuse and will work with you to provide alternative options as much as possible.

If your child does take antibiotics, make sure they replenish their supply of beneficial bacteria by taking a high-quality probiotic after the round is complete.

## Steps for Prevention

Ear infections are often preventable, and food allergies are one of the number one modifiable causes. Most children will find relief by:

- Following the [nutrition plan](#) and cutting out grains and sugars (including soda and fruit juice).
- Avoiding [pasteurized milk](#). Consumption of dairy products, particularly pasteurized dairy, is a culprit for many children.
- Avoid sugars and fruit juices, which will impair your child's immune response and make them more susceptible to these types of infections.
- If your child is consuming any wheat products you might consider eliminating them if they have had recurrent infections, as [subclinical gluten intolerance](#) can be a factor contributing to this problem.

Additionally, breastfeeding for at least six months has been linked to fewer ear infections in infants and babies. Exposure to second-hand cigarette smoke also increases the risk of ear infections in children, so make sure your kids are kept away from cigarette smoke.



The bottom line to remember is that if your child gets an ear infection, it doesn't mean he or she needs an antibiotic.

In fact, in most cases the drugs will only do more harm than good. Before following a knee-jerk response to get a prescription as soon as your child gets an ear infection, work with a health care practitioner who will encourage you to watch the illness and let it take its course before intervening with drugs.

Remember, in the vast majority of cases, ear infections will go away on their own in two to three days with no medications necessary.

Again, if you do decide to go the antibiotic route make sure to replenish their supply of beneficial bacteria by taking a high-quality probiotic after the round is complete. Ask your WellnessOne doctor or receptionist about the probiotics available in the office.