

Management of Otitis Media Related Diseases in Children with a Cochlear Implant

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摘要

Abstract

Conclusion. In all, 4 of 19 children with a cochlear implant (CI) with otitis media developed cholesteatoma. The insertion of a CI may interfere with normal mastoid pneumatization, stimulate mucosa as foreign body, or act as a nidus of infection. Regular follow-up is necessary for children with a CI at the prevalent ages of otitis media. Antibiotic treatment is suggested whenever acute otitis media is suspected, to prevent chronic progress of infection, cholesteatoma, or even meningitis. Objective. To evaluate treatment modality and outcomes of otitis media-related diseases in children with a CI. Patients and methods. This was a retrospective case review in a tertiary referral center of Taipei Medical University, Chi Mei Medical Center. All patients had a history of otitis media or related disease in the implanted ear. Treatments included antibiotics, tympanotomy, and tympanomastoidectomy. Results. In all, 19 of 186 children with a CI were identified as having otitis media, and 4 of them as having cholesteatoma. Among the others, 10 were identified as having acute otitis media, 4 as having middle ear effusion, and 1 as having mastoiditis in the implanted ear. Surgery was performed in children with cholesteatoma and mastoiditis. The CIs of three children were eventually explanted to eradicate cholesteatoma.