## HELPING MIDDLE EAR INFECTIONS

Dr. Derek Conte

By Dr. Derek Conte

Earaches (Otitis). We've all had them. They can be extremely painful and, if neglected, dangerous. There are three types of Otitis, each affecting a different part of the ear. Otitis Externa, or swimmer's ear, is an infection of the outer canal - the sound-

collecting part of the ear. Usually the ear has been too moist, promoting infection due to fungi or bacteria. Otitis Interna is an infection of the inner ear, the area that is concerned with our sense hearing, balance, static position and motion. These infections can produce vertigo, nausea, deafness and, because of its proximity to the brain tissue,

must be closely monitored.

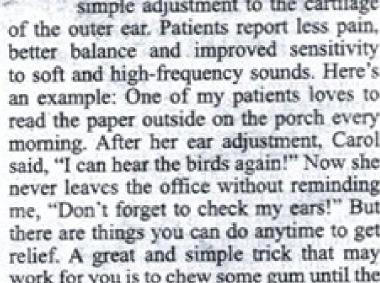
Otitis Media is a middle ear infection affecting the chamber between the outer and inner ear areas and contain the eardrum and three tiny bones which receive vibrations from the outside world. At the bottom of this chamber is the Eustachian tube, which functions like the waste pipe of a toilet, and rids the chamber of junk and dirty water. If this tube becomes clogged or too narrow to pass material to the throat, the backup can cause infection and great pain. High-frequency hearing loss and even some loss of balance may also result.

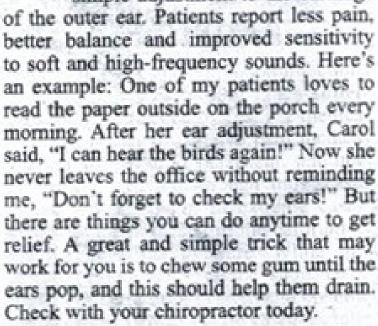
Otitis Externa and Media are very among children especially common because their ear canals slope downward toward the eardrum, allowing moisture and microbes to settle there or, in the case of O. Media, bacteria from the throat can creep up the Eustachian tube and into the middle ear. Repeated childhood infections are a big problem, causing much suffering, including burst eardrums. The medical treatment is usually to give pain medication, ear drops, or if persistent, antibiotics are administered, though most cases resolve without them. In extreme cases,

a tube is placed in the eardrum to relieve the pressure. While this method helps in the short term, the eardrum is scarred and the hole doesn't always close when the tube falls out after several years.

A more elegant solution is to encourage the Eustachian tube to open up and do its intended

job. This can be achieved with a simple adjustment to the cartilage





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