



SUMMARY OF OTOVENT PAPER

Kaneko. Y., et al. *Middle Ear Inflation as a Treatment for Secretory Otitis Media in Children*. Acta Otolaryngol (Stockh) 1997; 117; 564-568.

Although Otovent specific, involved autoinflation as a modality for treatment of Secretory otitis media. Copy of the abstract and results below.

Clinical evaluations of middle ear inflation for secretory otitis media (SOM) were performed with special emphasis on the influence of seasonal and aging factors. One hundred and forty-nine children between the ages of 3 and 9 years (227 ears) were all diagnosed as SOM by pneumatic-otoscopic findings, and type B tympanogram (TG) at 3 weeks or more after the onset of acute SOM or the initial observation of SOM.

Middle ears were inflated by Politzer's method or by our modified method once or twice each week for 2 months. After inflation, TG displayed two different time sequences: one group changed to the A or C type immediately after inflating the ear one or more times, but usually returned gradually to the B type (TG-improved group); and the other group remained without any changes (TG-unchanged group) for the duration of this study.

The healing rate in the TG-improved group was significantly higher than in the TG-unchanged group at the 2-month endpoint. The cure rate of SOM was significantly higher in spring than in autumn in the TG-unchanged group but not in the TG-improved group. There were almost no differences between the healing rates in the 3-5 and 6-9 year-old children.

When a TG-unchanged ear is found in autumn during the 2-month inflation treatment, more careful and forcible treatments should be introduced later, especially to children between the ages of 3 and 9 years.

Any questions or points of clarification can be directed to the undersigned.

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