Occurrence of otitis media in children and assessment of treatment options

Dear Editors,

I came across a very interesting article published in your esteemed journal titled ‘Occurrence of otitis media in children and assessment of treatment options’ by Nwokoye et al. The study had been well planned and was very thought provoking. However, I beg to differ from the author’s conclusion and would like to highlight the same through your esteemed journal.

The efficacy of antibiotics in otitis media has been a subject of great debate amongst healthcare providers, and there are studies supporting as well as advising against their regular use. Most of the studies have recommended starting antibiotics in high-risk groups such as patients with bilateral acute otitis media and those aged less than two years; this practice is followed in our institution as well. However, there are still lacunae in our knowledge regarding which patients exactly constitute this ‘high-risk’ group and further trials can be planned in this regard.

The antibiotic used in the study is amoxicillin or an amoxicillin-clavulanic acid combination, but what is not clear is when the patients were shifted from an amoxicillin regimen to an amoxicillin-clavulanic acid combination. There is still debate and controversy regarding the dosing and duration of amoxicillin-clavulanic acid for otitis media, with various studies recommending different regimens. Another point which needs to be emphasised is the emergence of organisms resistant to amoxicillin, which can lead to treatment failure.

A suggestion for improving the methodology would be to follow up the patients treated with antibiotics for the development of recurrence and/or complications. Such data would add weight to the authors’ conclusion. This can be done in future studies.

With hardly any newer antibiotics being developed, and the emergence of resistant strains, our options for treating patients with infection are becoming limited; therefore, judicious use of antibiotics is vital. A prospective, randomised trial that evaluates the efficacy of antibiotics for otitis media in children, with a longer follow-up period, is required for a definite conclusion.

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References
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