

EVALUATION OF THE COMMUNITY EAR IRRIGATION SERVICES

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BACKGROUND

Cerumen impaction is the build-up of earwax that causes symptoms such as sensation of fullness, hearing impairment or tinnitus or that prevents assessment of the external auditory canal and/or eardrum. Earwax that is not naturally extruded can lead to impaction which requires active treatment. A Cerumenolytic agent is usually the first-line treatment followed by ear irrigation done in the community. Micro-suctions the third-line and can be done by a consultant only. If not contraindicated, ear irrigation has a high success rate.

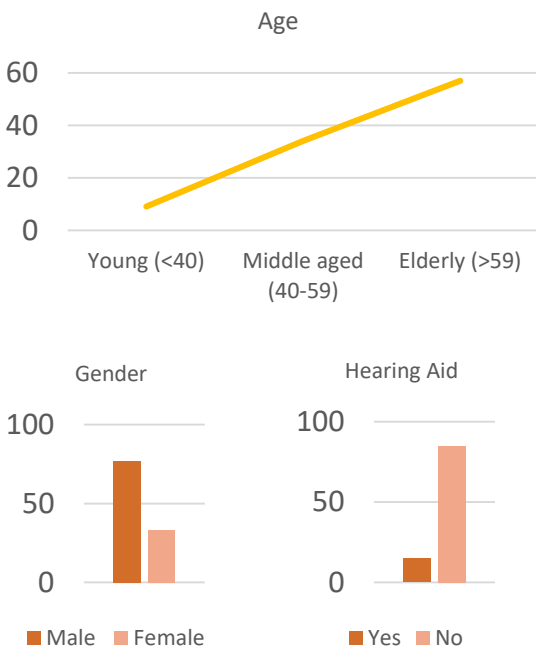
AIMS AND OBJECTIVES

To evaluate the effectiveness of ear irrigation done in the community in terms of guideline adherence and symptomatic relief and to assess the relationship between cerumen overproduction and specific medical and social conditions.

METHODOLOGY

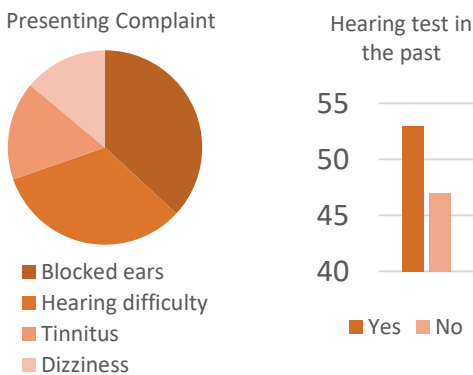
Data was collected prospectively over an 8-week period in community ear irrigation clinics at Eccles Gateway and Walkden Health Centre. The project sample size was 100 and questions from a pro-forma were asked to patients after the clinic.

PATIENTS DEMOGRAPHICS

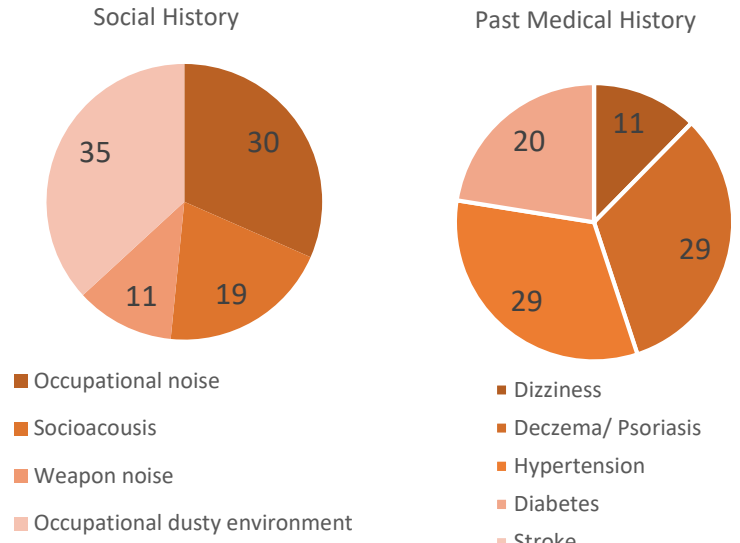


PRESENTING COMPLAINT

The most common presenting complaints were blocked ears and hearing difficulty. More than 2/3 of the patients had recurrent cerumen impaction. Even if more than half of them used olive oil for at least 2 weeks, no difference in outcome was found between them and those who used olive oil for less than 2 weeks, provided that they used it for a minimum of 5 days.

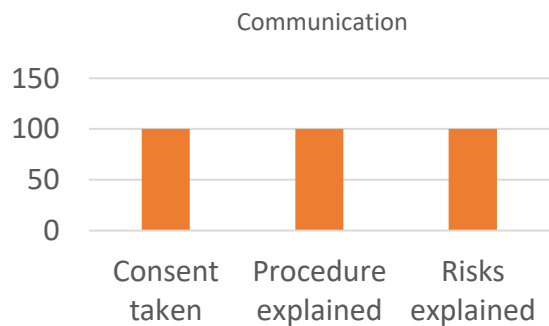
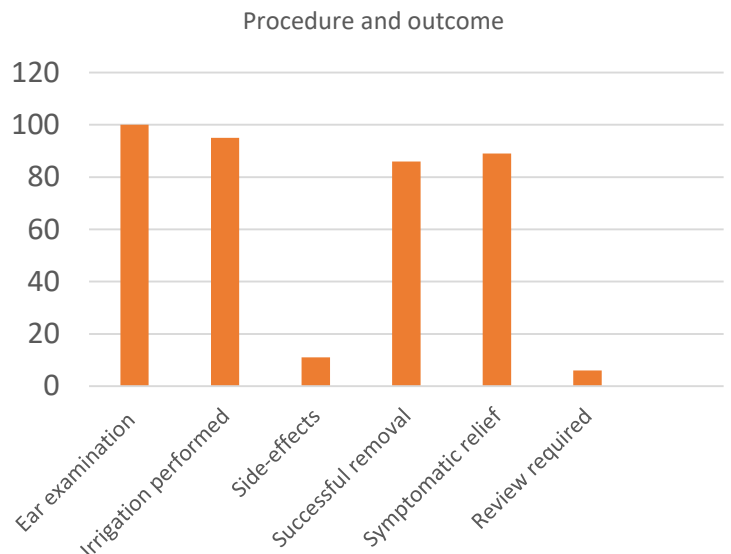


PAST MEDICAL AND SOCIAL HISTORY



EAR IRRIGATION PROCEDURE

Only one patient did not have any syringing done due to a recent ear infection, and 4 others since the wax had been extruded by the use earwax softeners alone. In 89% of cases successful removal was achieved with symptomatic relief. Guidance about communication was followed in all cases. A possible relationship might exist between cerumen overproduction and environmental exposure to loud noise, and also dermatological conditions such as eczema or psoriasis.



CONCLUSION

Ear irrigation has been shown to be effectively and safely performed in the community during this project, while abiding by the guidelines. Screening done at the General Practice makes the process faster and more efficient by reducing the number of patients with contraindications presenting at the clinic. Finally, the project also highlighted the importance of aural care and patients' education about the harm of self-cleaning.