

CHRONIC SUPPURATIVE OTITIS MEDIA - the road to WHO

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Coalition for Global Hearing Health – Conference 25-26 July 2014 St Catherine's College, Oxford, United Kingdom



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PREVENTION OF HEARING IMPAIRMENT FROM CHRONIC OTITIS MEDIA

Report of a WHO/CIBA Foundation Workshop

held at The CIBA Foundation, London, U.K. 19-21 November 1996

Number Two in the series:
Strategies for Prevention of Deafness and Hearing Impairment

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WORLD HEALTH ORGANIZATION

PREVENTION OF DEAFNESS AND HEARING IMPAIRMENT (PDH)

- •In this meeting, chronic otitis media = chronic suppurative otitis media & chronic perforation of the tympanic membrane
- •COM is an important public health problem with substantial economic and societal costs.
- •CSOM prevalence ≥ 1% in children indicates there is an unavoidable burden of the disease, dealt with in the general health care context.
- •CSOM prevalence ≥ 4% in children indicates a massive public health problem, needs urgent attention in targeted populations.
- •COM is a major global cause of hearing impairment, and this may have serious long-term effects on language, auditory and cognitive development and educational progress.

Table 1. Global prevalences of COM

GROUP	POPULATION	PREVALENCE
Highest	Inuits	12-46 %
	Australian Aboriginals	12-25 %
	Native Americans	4-8 %
High	5 Pacific Islands	4-6 %
	Africa	3-6 %
Low	Korea	2 %
	India	2 %
	Saudi Arabia	1.4 %
Lowest	Ų\$A	<1%
	UΚ	< 1 %

Chronic suppurative otitis media

Burden of Illness and Management Options



Child and Adolescent Health and Development Prevention of Blindness and Deafness

World Health Organization Geneva, Switzerland 2004

Definition

Chronic suppurative otitis media (CSOM) is defined as a chronic inflammation of the middle ear and mastoid cavity, which presents with recurrent ear discharges or otorrhoea through a tympanic perforation.

Chronic Suppurative Otitis media: Burden of illness and Management options

Table 1. Classification of countries according to CSOM prevalence

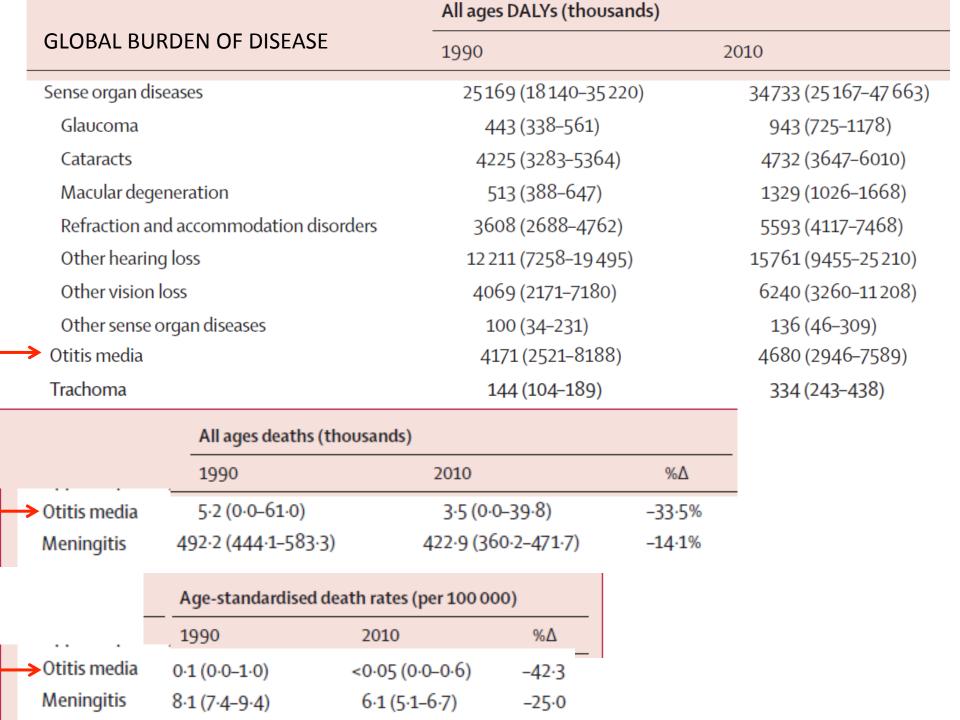
Group	Populations	
Highest (>4%) – urgent attention needed to deal with a massive public	Tanzania, India, Solomon Islands, Guam, Australian Aborigines, Greenland	
health problem		
High (2–4%) – avoidable burden of disease must be addressed	Nigeria, Angola, Mozambique, Republic of Korea, Thailand, Philippines, Malaysia, Vietnam, Micronesia, China, Eskimos	
Low (1–2%)	Brazil, Kenya	
Lowest (<1%)	Gambia, Saudi Arabia, Israel, Australia, United Kingdom, Denmark, Finland, American Indians	

Table 5. Frequency of hearing impairment from CSOM in different study settings

Setting	Proportion of CSOM cases	Proportion of cases of hearing
	with hearing impairment	impairment due to CSOM
Luanda, Angola (slum area)	66%	9.8% (12)
Angola (refugee camp)	52%	3.3% (15)
Tanzania (urban and rural district)	64.7%	3.6%
Tanzania (354 deaf children)		8.8% (117)
Luanda, Angola and Tanzania combined	63 %	8.7%
Kenya	63% (76)	
Greenland (167 children)		14.5% (76)
Bauru, Brazil (urban poor and orphanage)	100%	13.7%
India	77%	
Sierra Leone (2015 rural children)		26.4% (151)
Thailand (6046 people from 6 regions)		52.2% (7)
Burma (90 000 schoolchildren)		80% (183)
Saudi Arabia (6421 schoolchildren)		19% (8)

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Sierra Leone (2015 rural children)	children	26.4% (151)
Thailand (6046 people from 6 regions)	without CSOM had HI (relative	52.2% (7)
Burma (90 000 schoolchildren)	risk of HI	80% (183)
Saudi Arabia (6421 schoolchildren)	=18.3)	19% (8)



WHO Media Centre: Deafness and hearing loss

Fact sheet N°300 (Updated February 2014)

Acquired causes

- Chronic ear infection, which commonly presents as discharging ears, can lead to hearing loss. In certain cases this condition can also lead to serious, life-threatening complications, such as brain abscesses or meningitis.
- Collection of fluid in the ear (otitis media) can cause hearing loss.
- Among children, chronic otitis media is the leading cause of hearing loss.











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The neglected tropical diseases result from four different causative pathogens:

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Rabies

Protozoa

Chagas disease

Human African trypanosomiasis (sleeping sickness)

Leishmaniases

Helminth

Cysticercosis/Taeniasis

Dracunculiasis (guinea-worm disease)

Echinococcosis

Foodborne trematodiases

Lymphatic filariasis

Onchocerciasis (river blindness)

Schistosomiasis

Soil-transmitted helminthiases

Bacteria

Buruli ulcer

Leprosy (Hansen disease)

Trachoma

Yaws

Other neglected conditions:

Chronic suppurative otitis media (CSOM)

Mycetoma

Nodding Syndrome (NS)



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1 April 2014 | Geneva Stakeholders call on WHO to lead a network aimed at elimination of human African trypanosomiasis

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Strongyloidiasis

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CSOM

What is chronic suppurative otitis media (CSOM)?

CSOM is an inflammatory condition of the ear that causes recurrent ear discharge (otorrhoea) through a perforation of the ear drum (tympanic membrane). The disease usually begins in childhood, as a spontaneous tympanic perforation resulting from an acute infection of the middle ear. known as acute offis media. (AOM), or as a sequel of less severe forms of otitis media (otitis media with effusion).



CSOM is an inflammatory condition of the ear that causes recurrent ear discharge through a perforation of the ear drum.

What is the prevalence of CSOM?

Prevalence surveys, which vary widely in methodology, estimate that the global burden of illness from CSOM may involve 65 to 330 million individuals with draining ears. According to the 2004 WHO report on CSOM, the prevalence of CSOM ranges from less than 1% in developed countries (such as the Denmark, Finland, UK and USA), to as high as 30% to 46% among certain groups, such as the Inuits of Alaska, Australian aboriginals and others. The report categorized the countries for which data were available based on the prevalence of CSOM into lowest, low, high and highest. The lowest were those countries with prevalence below 1% (mentioned





WHO publications

Read WHO publications on CSOM.

Effectiveness of shortened course (<= 3 days) [less than or equal to 3 days] of antibiotics for treatment of acute offits media in children

A systematic review of randomized controlled efficacy trials. World Health Organization, 2009

Chronic suppurative otitis media: burden of illness and management options World Health Organization, 2004

Prevention of hearing impairment from chronic otitis media

Report of a WHO/CIBA Foundation Workshop, London, U.K., 19-21 November 1996

http://www.who.int/neglected_diseases/diseases/otitis/en/

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