

# P.E.A.R.L.S. Practical Evidence About Real Life Situations



## Antihistamines and/or decongestants not recommended in children with otitis media with effusion

Clinical Question	Are antihistamines, decongestants or combination therapy effective in children with otitis media with effusion (OME)?
Bottom Line	Antihistamines and/or decongestants do not help and may harm when used for symptoms of OME ('glue ear'). There was no benefit for any of the short or long-term outcomes including resolution of the fluid, hearing problems or the necessity of additional referral to specialists.
Caveat	These medications caused significant side-effects, such as gastro-intestinal upset, irritability, drowsiness or dizziness in approximately 10% of the patients.
Context	OME is a common condition in which there is fluid persisting in the middle ear. Many treatments have been suggested. Watchful waiting is the best approach with consideration of referral for evaluation by an ENT consultant if symptoms persist beyond 12 weeks.
Reference	Griffin GH, Flynn C, Bailey RE, Schultz JK. Antihistamines and/or decongestants for otitis media with effusion (OME) in children. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 4. Art. No.: CD003423. DOI: 10.1002/14651858.CD003423.pub2. This review contains 16 trials involving 1,737 participants.
Date written (author) Pearls #10	March 2007 (Brian R McAvoy)

NNT = numbers needed to treat to benefit one person

NNH = numbers needed to harm one person

Both NNT and NNH are only reported if the studies or pooling of studies is statistically significant

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