

# Health Tips

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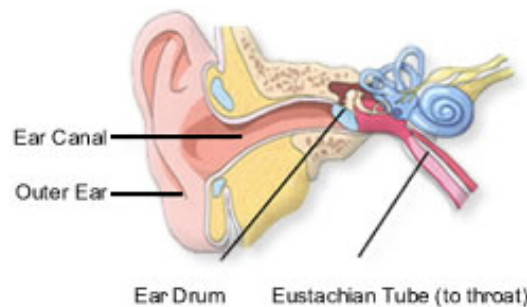
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## Health Tip: Why do my ears feel "stopped up"—a primer on Eustachian tube dysfunction

If your ears have ever "popped", you have experienced the Eustachian tube doing its job. The Eustachian tube is a narrow canal that connects the middle ear to the throat, right behind the nasal cavity. The middle ear is the air-filled space behind the eardrum that contains the three middle ear bones (the ossicles) that are involved in hearing. The main functions of the Eustachian tube are to act as a pressure-equalizing valve for the middle ear and to drain the mucus produced by the lining of the middle ear. Swallowing or yawning opens the Eustachian

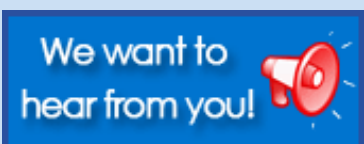


tube and allows air to flow into or out of the middle ear, equalizing the air pressure on both sides of the eardrum. When this happens, the characteristic "pop" may be felt.

**What is Eustachian tube dysfunction?** Eustachian tube dysfunction occurs when the Eustachian tube is unable to function properly. The most common causes for this are infections such as the common cold, sinusitis and throat infections. Other causes include nasal allergies (e.g. allergic rhinitis) and exposure to pollutants or cigarette smoke. All of these can cause inflammation and swelling of the Eustachian tube. Should the tube become swollen to the point of becoming blocked, the lining of the middle ear absorbs the air that is trapped there. This creates a partial vacuum in the middle ear which pulls the eardrum inward. Ear drum retraction along with the negative air pressure are responsible for causing the predominant symptoms of Eustachian tube dysfunction---pain, a sensation of pressure or fullness in the ears, and hearing loss. Dizziness, unsteadiness and ringing in the ears can occur also. Young children (especially ages 1 to 6 years) are at particular risk for Eustachian tube dysfunction because they have very narrow Eustachian tubes. Also, they may have adenoid enlargement that can block the opening of the Eustachian tube.

**Self care for Eustachian tube dysfunction:** It is not uncommon for the symptoms associated with Eustachian tube dysfunction to persist even after the symptoms of an acute upper respiratory tract infection have subsided. Given

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enough time, usually on the order of a week or so, the inflammation and swelling gradually go away, and the Eustachian tube starts to resume its normal function. During the time that the pressure in the middle ear is equalizing to the outside air, popping may be felt. This is a sign that the Eustachian tube is starting to function normally. Once the pressure becomes equal, symptoms resolve. Measures that can help open the Eustachian tube include:

- Sucking on candy, chewing gum, or yawning.
- "Popping the ears" -exhaling while holding the nostrils closed and the mouth shut. A safer way to do this, since there is a risk of rupturing the ear drum if exhaling too forcefully, is to blow up a balloon.
- Eating, drinking or just swallowing activates the muscles in the back of the throat which helps open the Eustachian tube.

Since swelling in the nasal passages can contribute to blocking the opening of the Eustachian tube, another helpful "home remedy" involves use of nasal irrigation. This can be done with a bulb syringe or Neti pot and saline solution.

**Medical treatment of Eustachian tube dysfunction:** A number of medications can help Eustachian tube dysfunction by relieving nasal congestion and swelling near the opening to the Eustachian tube. These include decongestants that are taken by mouth (pseudoephedrine) or by a nose spray (phenylephrine), oral antihistamines, and intranasal steroids. The specific medication that is used hinges on the underlying cause for the dysfunction. For example, antihistamines would be helpful when allergies are responsible, whereas an intranasal steroid might be used following an upper respiratory tract infection. Identifying the particular allergen a patient is sensitive to and eliminating it from the environment may reduce the patient's symptoms also.

**Surgical Treatment:** Surgery is usually reserved for cases of chronic Eustachian tube dysfunction that persist despite self care measures and medical treatment. The primary goal of surgical treatment is to bypass the Eustachian tube and re-establish ventilation of the middle ear. This is done to restore hearing, relieve pressure sensation in the ear, and reduce the tendency for middle ear infections. The most common procedure used for chronic Eustachian tube dysfunction is the placement of pressure equalization (PE) Tubes.

**Prevention of Middle Ear Problems with Flying:** One of the most common situations leading to Eustachian tube problems is flying. During airplane travel the ears are subject to large swings in barometric pressure. For most people, this pressure easily escapes out through the Eustachian tube without causing problems. Those with a tendency to Eustachian tube dysfunction, colds or nasal allergies, however, can have severe symptoms when flying. Yawning, swallowing, chewing gum, or trying to "pop" ones ears usually will help with Eustachian tube function. Use of decongestant medications or nasal sprays, taken so that their peak activity is during the last hour of flight can to equalize pressure in the middle ear and reduce symptoms.



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