Glue –Ear Group Ezine Fact Sheet.

History:- The Manual & Dietary Treatment of Otitis Media with Effusion. (OME) (Glue Ear.)

1. In November, 1999, the ENT News (Vol.8, No. 5) published a peer medical review of my work at the six year stage involving 150 children. 21,000 ENT Consultants around the world read this bi-monthly review. Of that number, only 13 Consultants contacted me, and none of these were from the UK.
2. In April 2000, I was invited to the Royal College of Physicians to give a lecture on my work. When I arrived, I found that I had only been allocated 10 minutes. A friendly ENT Consultant, who will remain nameless out of respect, informed me that I was to be chastised by the guru of Grommet / Ventilation Tube operations in the UK. After giving them an introduction into my research, I then left the building knowing one thing, that these guys were all about business and not the children.
3. Since 2000 we have applied to three different hospitals to carry out Random Controlled Testing (RCT's) and have been refused access, with no ethical reason for the refusal. One of these applications had the backing of a Senior Audiological Scientist. Year in and year out in the UK there are 65,000 Grommet / Ventilation Tube operations, and at the same time thousands of Adenoids are removed.
4. Calpol-UK:- One of the most commonly used drugs used to reduce pain/fever/ temperature. The age and dosage is on the box, bottle, and leaflet, which is nicely folded and tucked away in the box, where the makers do not especially want you to find it. On the back of the leaflet under 'side-effects' it says in not so many words that *this medicine opens up your child to more colds.* More colds means more congestion (Mucus), which means more Glue Ear, which leads onto a cycle of illness the child, cannot get off.
5. Hydrotherapy:- To reduce a fever/temperature prepare four face flannels. Make two of them hot, but not boiling, and two cold, but not freezing. For example place a hot flannel to the left side of the child's neck, not the front, and a cold one to the right side. After two minutes they will have both changed their temperatures, so remove them. Now replace them with the other two prepared flannels, but this time place the cold one where the hot one was to the left side and the new hot one to the right side. You should carry out five applications every two minutes, a total of ten minutes in all. If it is a severe fever/temperature carry out the whole procedure one hour later. If it is not, leave it for two hours. The hands on treatment that you have learnt from the video will also help to reduce a temperature slowly. The emphasis is on the word 'slowly'. When you use a drug you are hitting the fever with a sledgehammer, and suppressing the virus etc back into the body. If it is a hoard of immature viruses, whose intention it is to leave the body, and reach the atmosphere, where they form a protein coat, they will want to be looking for the next unsuspecting host. The protein coat is a disguise to fool the immune system. The seriousness of the cold is determined by the level of the hosts immune system, which as we know can be low for all sorts of reasons. As a last resort use Neurofen, keeping in mind it is a sledgehammer.
6. Cows Milk:- Many of us Grand-Parents, including myself, have been brought up to believe that cows milk was a good source of calcium and energy. It is true that there is a great deal of calcium in cows' milk, but unless it is broken down properly in the digestive system, and assimilated into the blood stream, it will be treated by the immune system as an antigen. (Foreign body). The first reaction of the immune system is to defend itself, by producing massive quantities of mucus. This leads on to obstructing the middle ear, the sinuses, and can cause colic in babies. There are two main problems with cows' milk. The first is the Lactose (Sugar), which is a part of the make-up of the milk. Up to the age of

approximately two years of age we have Lactase enzymes, which break down the lactose, so that it can be assimilated into the blood stream, and not cause problems. After this age they die off naturally as we go onto more solid foods. The second problem is that the mature cow has four stomachs, two primary and two secondary. The calf has four immature stomachs, but requires two of its immature stomachs to digest its OWN mother's milk. As you all know we only have one stomach, and it is not our milk. It is interesting to note that the Chinese do not consume any dairy products whatsoever, but as we know they do eat an awful lot of vegetables. You will get more calcium from Broccoli, Kale, Okra, Cabbage, Carrots, Onions, Watercress and Turnips than you will from cows' milk. Good sources of calcium can be found in certain types of fish, nuts, grains, seeds, and dried fruits. Please remember that bananas are a mucus producing fruit, and account for a third of all fruit consumed in the UK. A good alternative to bananas is dates, and bite for bite contain three times as much potassium as bananas. For more information seek out a book on Nutrition from the local library.

7. Allergy Tests:- The most common tests are a blood sample, pinprick or hair analysis. These are only *indicator* tests and do *not* confirm that there is a problem. Only an Exclusion diet can do this. I have had many patients tell me at the consultation stage that they have been tested and are allergic to at least five base foods. After checking all five foods separately using the exclusion diet we have only ever found a maximum of two, with the majority being one. There are thousands of people in the UK that have never been given the advice to follow up with an exclusion diet, and subsequent re-test.
8. Exclusion Diet:- The most common food allergies in descending order are cows milk products, (Milk, cheese, yoghurt and butter), wheat and then eggs. An exclusion diet must only be used with regards to one food at a time. The child or adult must remove the food under suspicion for three weeks, and then on the last day of the third week consume for example a cow's cheese sandwich. When carrying out an exclusion diet there is no point in just reducing the intake of the suspected food, and it must always be followed by a re-test of the food in question. Within a matter of hours if that person is allergic to that food they will have a low-grade reaction, to a more severe reaction. The former may include symptoms of severe mucus in the throat and nose, with inflammation of the tonsils, and watery eyes. The latter may involve the person being down right ill. Please remember that even small quantities of an offending food may cause problems. *One peanut can kill.* The child or adult can be re-tested two or three years later to see if they have grown out of the allergy, which in some cases does occur. During this time period good alternatives are Goats milk (Unlike cows milk can be frozen.) and associated products, (Cheese & Yoghurt.), Soya products, Sheep's milk, and Rice milk.
9. Tonsils:- Parents are often told that their child's tonsils are 'over-large' or 'infected'. In most cases this is not true. To define it more accurately one would state that they are 'congested' which is quite different, and using this hands on treatment in association with the dietary change will reduce the congestion and of course their size.
10. Adenoids:- In the UK the ENT surgeons normally remove the Adenoidal Tonsils by the second or third grommet operation, stating that they are the cause of the Glue Ear. There is plenty of research projects in the USA that have proved that removing the Adenoids is a waste of time. Ask any parent in the UK when their child has reached their seventh grommet operation whether the removal of the Adenoids made any difference to their child.
11. Grommets / Ventilation Tubes:- These little inverted tyres only deal with the symptom of Glue ear, and not the cause. They do not fall out as many parents are told. The immune system throws them out. The immune system recognises the grommet as a foreign body, and treats it like a splinter in your finger. Many parents report that their child had never had an 'Ear Infection' before the grommets were fitted. Yes, the child failed their hearing test but

there were no infections, until after the operations. Think of it this way. If I use a knife and put two small holes in your forearm and leave the wounds open to the atmosphere, what is going to happen?

12. Antibiotics:- Most antibiotics in the UK are taken orally. There is a major problem with this procedure in that when we swallow them they travel down through the digestive system and not only wipe out the bad bacteria, but also the good bacteria, known as the 'Bacteria Flora'. Over 99% of the gut bacteria are the good guys, and without them we could not survive as a species. There is another life form that lives in the Small Intestine, which are the Yeast Cells, or better known to the public as Thrush. It is difficult to work out if they are symbiotic or parasitic. What we do know is that once the Bacteria Flora have been wiped out the yeast cells think they have discovered America and begin to proliferate, up and down the intestinal tube. More than often with the help of gravity they end up at the anal end, which we call Thrush, where we tend to use a prophylactic medication to clear the symptom. The yeast cells actually live on the wall of the digestive tract, which if you think about it, is the outside world. They form a barrier between your food and the blood. In other words the yeast gets first choice, and your blood receives what is left. Yeast cells live on sugar whether they be fast or slow release types of food. Your body requires sugar for energy. When yeast digests sugar we call it fermentation with a side effect of lots of gas, and the production of alcohol. Ask yourself this, where does alcohol go when you drink it, and what does it do to you? If the yeast cells are producing alcohol at say 3%, imagine what that can do to your brain over 24hrs, day in and day out. We often ask patients who have been taking courses of antibiotics, have you had any unusual signs of wind up or down; do you have bloat at odd times, and do you feel tired after a good nights sleep? When taking an antibiotic always consume some live yoghurt preferably goats. You can purchase Acidophilus capsules from a health food shop. A gallon of yoghurt probably equates to one capsule. It is not a good idea to consume Marmite when taking antibiotics, because it is 100% yeast.
13. Tympanum:- (Ear-drum). One of the most vasculated areas in the body second only to the tongue. Parents are led to believe that they are all, anatomically the same, whereas the truth be known they are quite different in their make-up and most importantly their thickness. With regards to the damage inflicted by the surgeon when inserting the grommets, one can draw on a simple analogy. How many caesareans can a female cope with before the scar tissue will not heal properly? As we know it is three. Why do the surgeons think that the eardrum is any different? These children will have early onset deafness.
14. Children Grow out of it:- Another misconception. The children do not grow out of it. What actually happens is that the problem changes into chronic sinusitis. We are told that Glue Ear in adults is a rare condition. Tell that to the adult sufferers that have been contacting me over the years, and why is the medical world in self-denial. Maybe we have to return to that sentence, 'They will grow out of it.'
15. Wax:- When the wax is produced it is very light yellow colour, and after three months it turns to orange. By six months it is brown, and by twelve months it is black. By this time it has lost all its acidity and is unable to protect the lining of the meatus. (External tunnel.) Never use cotton buds to evacuate wax, because you will only remove 50% of it, pushing back the rest of it towards the eardrum. The cotton bud also irritates the lining. The only occasion where you would use a cotton bud is if you suspect you have yeast cells in the canal.(Constant itching not to be confused with Eczema.) Apply some fresh lemon juice to the cotton bud and gently insert into the canal, no more than a quarter of an inch. The acidity of the juice will kill off the yeast cells. This should be done twice a day for ten days. If the problem persists use vinegar which is more acidic. Do not use vinegar as a first recourse.
16. Ear Treatment:- (Ear Pump.) A question most commonly asked by parents is why do I manage to get suction on the palm of my hand to only one side, or not at all? The answer is

quite simple. It means that the Eustachian Tube has not been released using the first articulation. (Jaw resistance.) Return to the first articulation, articulate using the resistance technique and return to the ear pump. In most cases you will feel a difference, but if not, just carry on and finish the treatment.

17. Swimming:- Can my child go swimming with grommets inserted and will they get an infection from the swimming pool water? The answer is that yes they can swim with grommets, and the chances of incurring an infection from a public swimming pool are unlikely. They put so many chemicals in the water it would be a miracle for anything to survive. This would be contra-indicated with reference to seawater. Where a child will pick up an infection is in the changing rooms where as we know they toss their towels on to the floor and then pick them up and dry their ears.
18. Ear Treatment:- Q. Why do we traction/pump the Spinal Cord? A. The ear and sinus treatment is a tool that you can use to decongest blocked or inflamed areas of the head and neck. It is basically a plumbing job. When we traction/pump the Spinal Cord we are stimulating the Cerebral Spinal Fluids (CSF). The CSF is very important with regards to Meningitis. In the public eye this word is probably second to cancer with regards to fear. We all know how to test the rash using a glass, but the child does not always have a rash. The simplest way is to ask the child standing or laying down to try and bend their head and neck forward. If they cannot manage more than ten degrees, then passively try to help them to do it. If they still cannot bend the head, then take them to the nearest hospital for further investigation.
19. NHS:- Q. Why is this treatment not on the NHS? The simple answer is that the ENT surgeon earns a great deal of money carrying out private Grommet / Ventilation Tube operations. Why would they want to reduce their income or save millions with regards to the NHS.
20. Freedom of Choice:- Q. Why as parents are we not given a choice with regards to the grommet operation vs manual treatment. A. This would have the same effect as the RCT's mentioned earlier in that it will break the hold that the ENT surgeons have over the control of this complaint. There is no reason whatsoever that the NHS Physiotherapist's cannot teach parents how to carry out this treatment.
21. Diet:- Q. Why are we almost never advised that diet is part of this problem? A. One of the reasons is that the medical under-graduate's no longer study nutrition within their five year course. The last course to do so, allocated half a day. It takes three years to become a Nutritionist at degree level.

This fact sheet has been devised to help parents with regards to many questions that up till now have been unanswered. If you have any useful questions or facts to add e-mail them and I will add them to the above.

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