



SUMMARY OF OTOVENT PAPER

Ogawa, H., *Otitis media with effusion: treatment by autoinflammation using a balloon*. Nihon Jibiinkoka Gakkai kaiho (2003) Volume 106:6 pp 685-91

Unable to obtain the paper for this study and not even sure if the study involved Otovent but the abstract below details the results of a product if not Otovent sounds very similar.

Resolution of negative middle ear pressure is important in treating otitis media with effusion (OME). We treated 34 children and 21 adults with OME by autoinflation using a nose tube and balloon in the 16 months from June 2001 to September 2002. Of these, 7 children and 5 adults had been treated for 3 years or longer, and had had grommets inserted. In 49 ears of 27 early cases of children, 34 ears (69%) improved in tympanometric findings converting to type A from type B, C2 and C5, and 9 ears (18%) of type B converted to type C1.

In 23 ears of 16 early cases of adults, 12 ears (52%) improved converting to type A from type B, C2, C5 and C1, and 3 ears (13%) to type C1 from type B. However, 4 ears of 4 children and 5 ears of 5 adults did not recover by autoinflation. In 7 children with prolonged OME in whom grommets had been inserted, 5 recovered due to autoinflation, whereas only one of 5 adults recovered. Of 6 patients who had not recovered, 2 were associated with asthma, nasal polyposis and eosinophil infiltration into the middle ear effusion.

In the other 2 patients, even when the middle ear effusion disappeared following grommet insertion, they still had dysfunction of the Eustachian tubes confirmed by sonotubometric examination. It seems no beneficial effects of autoinflation were maintained if patients had tubal dysfunction due to intensive inflammatory changes of the middle ear and tubal mucosa or other unknown origin.

Two patients used the device irregularly and rarely. There is a theoretical risk associated with this maneuver of causing baroinjury and forcing infected nasopharyngeal secretions into the middle ear, but we found no complications.

Any questions or points of clarification can be directed to the undersigned.

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