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Errors in antibiotic therapy of acute otitis media in children

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Statement of the Problem: Acute Otitis Media (AOM) is one of the most common diseases in children. AOM is 25-40% in the structure of all pediatric ENT-pathology in Russia. Approximately 42% of prescriptions for oral antibiotics in children are prescribed for AOM. Mastoiditis is the most frequent and dramatic complication of AOM.

Methodology & Theoretical Orientation: We have analyzed the history of children with acute mastoiditis. For the period from 2009 to 2017 in our clinic made 161 antromastoidotomy. In the diagram obvious the increase in surgical activity, indicating an increase in the frequency of complicated AOM. In 46 cases, mastoiditis was accompanied by subperiosteal abscesses, 4 - perisinuous abscesses, 4 – thrombosis of the sigmoid sinus, 2 - abscess of the cerebellum, 1 - epidural abscess of the temporal lobe. Otogenic meningitis was diagnosed in 7 patients. None of the children were vaccinated against pneumococcal infection.

Findings: The high frequency of complications of acute otitis media in children is due to errors in antibiotic therapy. Analysis of failures of starting treatment revealed three main reasons: (1) The use of low doses (20-30 mg/kg/day) of amoxicillin, creating suboptimal concentrations of the antibiotic in the focus of inflammation; (2) the empirical appointment of oral cephalosporins of the 3rd generation (cefixime and, especially, ceftibutene), which have a reduced antipneumococcal activity; (3) use of macrolides as a first-line therapy (due to the progressive decrease of susceptibility of pneumococci to 14- and 15-member macrolides).

Conclusion & Significance: Despite vaccination against pneumococcus since 2014, Streptococcus pneumonia remains the main causative agent of AOM in Russia; this is due to the anti-vaccination approach among the population. At this stage, the treatment of AOM requires high anti-pneumococcal activity of starting antibiotics (amoxicillin in doses of 60-90 mg/kg/day or ceftriaxone in a dose of 75 mg/kg/day).

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