

McLaren Print System Order

Order No: 59444 Reprint Previous Order No: 59403
Order Date: 2021-01-06
User: Bobbie Morris
Phone: 989-794-4032

Ship Location: McLaren Midland ENT-Attention Bobbie
801 Joe Mann Blvd., Ste H
Midland, Michigan 48642

Forms

Quantity: 500
Paragon Dept No: 56058
Dept Name: McLaren Midland ENT
Company Number: 810

Order Total Price: 68.00

Item Number: MM-34020
Item Description: Patulous Eustachian Tube
Revision Date: 12/2020
Print: 1 sided full color
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Misc Info:



Patulous Eustachian Tube

Your physician has found that you have Patulous Eustachian Tube as contributing to your ear symptoms.

The Eustachian tube (ET) connects the air-filled middle ear space to the back of the nose. The normal function is to keep the pressure in the middle ear equalized with pressure in the outside world. A valve near the opening into the middle ear allows controls this process. The valve is usually closed, which keeps bacteria and various other things in the mouth and nose from getting into the middle ear. It opens naturally when there is a big pressure difference between the middle ear and nose - blowing your nose, yawning, opening the mouth widely, and swallowing.

"Patulous Eustachian Tube" is a condition when the tube is abnormally open when it should be closed. This causes symptoms of autophony (hearing one's own voice louder and usually more low pitched), audible body noises (hearing sound of one's own breathing or chewing), sensation of fullness in the ear, and fluctuating sensation of the ear drum with breathing. It can be caused by weight loss, by hormonal changes from pregnancy, menopause, pre-menopause, hormone medication, or for no identifiable reason. Most of the time no specific cause is identified. Even though this makes the ear feel "full" or "stuffed up", the hearing stays normal. The full feeling is bothersome, but it does not cause pain and it is no threat to your ear or hearing. This is not typically permanent and will cause no damage.

This condition can be difficult to treat as it is a variation of normal anatomy. Below is a list of medical management options that can help alleviate these symptoms- success varies per each patient and a few things may need to be tried before finding your solution.

- Induce acid-reflux: drink a glass of orange or tomato juice an hour before bed and not take reflux medicine at night to induce some reflux and sleep on the affected ear. This helps get some reflux into the back of the nose on the affected side and cause some swelling to close the tube
- Preamin (intramuscular formula) 25 mg in 30 cc of saline nasal drops
- Double strength or hypertonic saline (1.8%) nasal drops
- PatuEND[®] vitamin supplement nasal drops (only available <http://earfdn.org>)

The important part on any nasal is to use it correctly- you should either lie down or tilt your head far back then turn 15 degrees toward the affected ear, place the drops in the nostril and sniff the solution into the back of the nose.

For bothersome symptoms that are refractory to medical management, surgical intervention may be an option to discuss with your physician:

- Placement of pressure equalization (myringotomy) tube
- Injection of filler substance around the opening of the eustachian tube or placement of cartilage graft
- The eustachian tube may be closed surgically and a perforation created in the eardrum as a last resort