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**Grommet Insertion in Children**

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| **Commissioning decision** | **The CCG will provide funding for grommet insertion in children under the age of 12 years old who meet the criteria defined within this policy. Funding approval for eligible patients must be sought**  **from the CCG via the Prior Approval process prior to treatment.** |

**Policy Statement:**

Funded for recurrent otitis media with effusion (OME) for children under the age of 12 years when there has been:

* confirmed diagnosis of OME followed by two visits to Audiology at least 3 months apart from the date of the first appointment with the GP and then referral for surgery **PLUS EITHER**
* diagnosis of persistent bilateral OME with a hearing level in the better ear of 25-30 dBHL or worse

**OR**

* diagnosis of persistent bilateral OME with a hearing level of less than 25-30 dBHL which is having a significant impact on the child’s developmental, social or educational status

The guidance is different for children with Down’s Syndrome and Cleft Palate; these children may be offered grommets after a specialist MDT assessment in line with NICE guidance.

It is also good practice to ensure glue ear has not resolved once a date of surgery has been agreed, with tympanometry as a minimum.

Adjuvant adenoidectomy is not recommended in the absence of persistent and/or frequent upper respiratory tract infections.

Adjuvant adenoidectomy should not be routinely performed in children undergoing grommet insertion for the treatment of otitis media with effusion.

Adjuvant adenoidectomy for the treatment of glue ear should only be offered when one or more of the following clinical criteria are met:

* The child has persistent and / or frequent nasal obstruction which is contributed to by adenoidal hypertrophy (enlargement)
* The child is undergoing surgery for re-insertion of grommets due to recurrence of previously surgically treated otitis media with effusion
* The child is undergoing grommet surgery for treatment of recurrent acute otitis media

**Rationale:**

This is a surgical procedure to insert tiny tubes (grommets) into the eardrum as a treatment for fluid build-up (glue ear) when it is affecting hearing in children. In most cases glue ear will improve by itself without surgery. In children with persistent glue ear a hearing aid is another suitable alternative to surgery. Evidence suggests that grommets only offer a short- term hearing improvement in children with no other serious medical problems or disabilities. Surgical management is funded in line with NICE Clinical Guidance on Surgical management of otitis media with effusion in children (CG60).

**Plain English Summary:**

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| Otitis media with effusion (OME) more commonly known as ‘glue ear’ is where there is a buildup of non-infected fluid in the middle ear space. This fluid may accumulate as a result of a cold, sore throat or upper respiratory infection. It can occur in one or both ears and usually affects children, but may occasionally occur in adults. It can cause temporary hearing loss, but usually clears up within 3 months. In children who have persistent symptoms it may be appropriate to operate and insert small temporary tubes called ‘grommets’ into the ear which help drain fluid away.  This policy outlines when ‘grommet’ insertion surgery may be appropriate for children under the age of 12 years.  To be eligible for grommet insertion your child will need to have two hearing tests at least 3 months apart to measure their degree of hearing loss. Hearing loss is measured in decibels Hearing Level (dBHL), which is a measure of the quietest sounds that your child can detect This test will need to show at least mild hearing loss. The table below is a guide to levels of hearing loss measured in dBHL.  If your child’s hearing tests reveal a level of slight hearing loss then grommet insertion may still be considered if this lower level of hearing loss is still causing notable difficulties for your child in terms of social or educational development.   |  |  | | --- | --- | | **Degree of hearing loss** | **Hearing loss range (dB HL)** | | Normal hearing | -10 to 20 | | Slight hearing loss | 21 to 24 | | Mild hearing loss | 25 to 40 | | Moderate hearing loss | 41 to 55 | | Moderately severe hearing loss | 56 to 70 | | Sever hearing loss | 71 to 90 | | Profound deafness | 91+ |   If your doctor believes that your child meets the criteria set out in this policy Gloucestershire Clinical Commissioning Group will fund the treatment. |

**Evidence base:**

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| NICE Guidance - [Surgical management of otitis media with effusion in children (CG60)](https://www.nice.org.uk/guidance/cg60) February 2008 - (on static list)  Cochrane Library - <http://ent.cochrane.org/guidelines>Otitis Media With Effusion: Comparative Effectiveness of Treatments.  Similarity to policies in other local CCGs – Bristol, South Gloucestershire, Bath and North East Somerset, West Midlands, Oxfordshire. |

For further information please contact [GLCCG.IFR@nhs.net](mailto:GLCCG.IFR@nhs.net)

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| **Date of publication** | 1 August 2015 |
| **Policy review date** | January 2023 |

**Consultation:**

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| **Consultee** | **Date** |
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| Planned Care Programme Board | 31st March 2015 (virtual) |
| CCG Governing Body Development Session | 4th June 2015 |
| GHNHSFT (via General Manager/Head of Contracts) | 18/05/2015 – 29/05/2015 |
| GP Membership (via CCG Live/What’s New This Week) | 06/05/2015 – 05/06/2015 |
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| Has the consultation included patient representatives? | Yes |

**Policy sign off:**

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| **Reviewing Body** | **Date of review** |
| Effective Clinical Commissioning Policy Group | 8th November 2016 |
| Integrated Governance and Quality Committee | 18th June 2015 |

## Version Control:

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| **Version No** | **Type of Change** | **Date** | **Description of Change** |
| 1 |  | 1.8.15 |  |
| 2 | Review date | 8.11.16 | Review date changed to 8.11.18 |
| 3 | Policy change/review date change | 1.2.18 | Prior approval removed, policy changed to  CBA from 1.2.18. Review date changed to 8.11.18 |
| 4 | Review date change | 18.10.18 | Review date changed to Dec 2019; Plain  English Summary and Rationale updated. |
| 5 | Review date change &  Plain English summary | 09.01.20 | Review date changed to January 2023: Plain  English Summary updated. |
| 6 | Minor wording added | 11.3.21 | Wording added around adjuvant adenoidectomy for the treatment of glue ear in policy statement to bring in line with EBI Policy. |