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| **Ear Syringing**Complications of ear syringing include infection, trauma and perforation. Therefore this is only considered if the above recommendations have proved to be unsuccessful. Ear wax needs to be softened as above for at least 2-3 weeks before attempting to syringe. **Ongoing self-care**If your ears are regularly becoming blocked with wax, after clearing the blockage, it is suggested that you use olive oil drops as above around once a week to keep the wax soft and encourage the natural process of wax expulsion. **Preventing earwax build-up** You can’t prevent earwax. It’s there to protect your ears from dirt and germs. However, you can keep using ear drops to soften the wax. This will help it fall out on its own and should prevent blocked ears. If you are prone to repeated wax built up you can continue to use olive oil drops twice a week to prevent recurrence. |    **DOC-0126 / 20.01.17** **Further information available:** * https://www.strathcalderpractice.co.uk/
* www.patient.co.uk
* [www.nhs.uk/symptomchecker](http://www.nhs.uk/symptomchecker)
* https://www.nhsinform.scot/illnesses-and-conditions/ears-nose-and-throat/earwax-build-up
 | **Ear Wax** **Representing:- Dorset LMC- Hampshire & Isle of Wight LMC- Wiltshire LMC****Supporting:- Jersey, Guernsey & Alderney GPs** **Strathcalder Practice**We are committed to providing best practice and high quality medical care to our registered patients. Ear syringing is no longer considered to be the first line treatment for the clearing of ear wax and it is not a funded service within the NHS for General Practice. Current guidelines are that ear drops should be used to soften the wax which will then enable the natural movement of the wax from the ear. Further information and treatment options are available in this leaflet.  |
| **Ear Wax** * Ear wax is normal it provides protection for your ears
* Your ears are self-cleaning
* The movement of your jaw while eating and talking moves the wax along the canal
* Ear wax only becomes a problem if it causes deafness, pain or if a health professional needs a clear view of the ear drum

**What makes ear wax worse?*** The amount of wax produced varies from person to person
* Some people produce excessive amounts of wax and this can block the ear canal
* Wearing a hearing aid, ear plugs and or head phones can interfere with wax expulsion
* Narrow and or hairy ear canals
* If you are elderly – the wax produced may be harder and drier
* Dry skin in people who suffer with eczema or psoriasis

**What you shouldn’t do, some suggestions!*** **Do not** use cotton buds to clean the ear. This forces the wax deeper into the canal and can cause damage, trauma and possible infection
* **Do not** use objects such as matches, hair grips, crochet hooks, knitting needles, keys etc. this can cause trauma and possible infection
* If your ears are itchy **do not** scratch or rub them with your finger nails or any other objects
* **Do not** use anything smaller than your elbow in your ear!!
 | **What helps?*** Try and keep your ears dry. When washing your hair, showering or swimming putting some Vaseline around the inner part of your ear can help
* Don’t put your head under the water when bathing
* If you regularly get blocked ears, use olive oil drops weekly

**When to see the GP or Advanced Practitioner**If you are experiencing the following symptoms:* Pain
* Discharge or bleeding from the ear
* Sudden deafness
* Dizziness
* Foreign bodies (you may be advised to attend A&E)

**What you can do to manage the problem?**If you are **no**t experiencing **any** of the symptoms above, the following is recommended:1. **Olive Oil Drops/Spray** – It is recommended that this is done 2-3 times daily for at least 2-3 weeks. Lie on your side with the affected ear uppermost
2. Pull the outer ear gently backwards and upwards to straighten the ear canal
3. Put 2-3 drops of olive oil into the affected ear(s) and gently massage just in front of the ear
4. Stay lying on your side for 10 minutes to allow the wax to soak up the oil
5. Afterwards, wipe away any excess oil but do not plug your ear with cotton wool as this simply absorbs the oil
6. Your hearing problem may initially worsen after first starting to use the olive oil drops; this is why you are advised to concentrate on treating one ear at a time if both ears are blocked with wax.
7. In most cases, the wax will have softened sufficiently to encourage the wax to come out without further intervention.

  | **Ear irrigation (ear syringing)** Ear irrigation is no longer recommended as first line treatment for blocked ears. Ear syringing can lead to ear infections, perforated ear drum and tinnitus (persistent noise). It is not a requirement to provide this service in General Practice. Your pharmacist can help with earwax build-up. They can give advice and suggest the treatment. **If you have ear symptoms that concern you, please book an appointment to see the GP at the Practice.**.**Self-irrigation** There are now a number of over- the- counter kits available from pharmacies. These contain a wax softener as drops which you use for 3-4 days and a small bulb syringe to enable you to remove the wax from your ear canals yourself. These kits can be easily purchased from your local pharmacy or online by searching ‘ear wax bulb syringe’ The specially designed ear syringes are designed to create enough pressure to clear wax out of the ear without causing damage to the ear drum. It is very important to use hand- temperature, tepid body temperature water for this process having used olive oil or the drops in the previous days. Always follow the instructions provided with the kit. ***Research shows that bulb syringing is effective and acceptable to patients and could significantly reduce the use of NHS resources.***Are they the same thing as the CCGs or the BMA?No. CCGs are different. They are commissioning bodies which mean they are involved in designing, purchasing and monitoring patient care. They are membership organisations but CCGs are answerable to the government as well as GPs. LMCs are advisers and are only answerable back to their GPs The BMA is the national voice of doctors and GPs. They negotiate on matters at a national level. They are a trade union which confers special legal connotations. Who are LMCs representing GPs to? They represent General Practice to everyone around GPs at a local level. That may be working with Area Teams, CCGs, RCGP, the LETB (Deanery) or charities. They can iron out misunderstandings and help engender mutual understanding. LMCs also offer other non-clinical services from expertise around disciplinary issues, contract changes to medico-legal issues e.g. Data Protection Act interpretation and sometimes education and training. They are experts at the time when you can’t think of anyone else who would know the answer.Are they the same thing as the CCGs or the BMA?No. CCGs are different. They are commissioning bodies which mean they are involved in designing, purchasing and monitoring patient care. They are membership organisations but CCGs are answerable to the government as well as GPs. LMCs are advisers and are only answerable back to their GPs The BMA is the national voice of doctors and GPs. They negotiate on matters at a national level. They are a trade union which confers special legal connotations. Who are LMCs representing GPs to? 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If you are a locum then you need to pay a subscription of £100 annually but for **all local GP trainees we offer the first year post qualification free.****Locums can receive our e-mails free of charge****Send us your name, e-mail address, GMC number and CCT date to office@wessexlmcs.org.uk**Are they the same thing as the CCGs or the BMA?No. CCGs are different. They are commissioning bodies which means they are involved in designing, purchasing and monitoring patient care. They are membership organisations but CCGs are answerable to the government as well as GPs. LMCs are advisers and are only answerable back to their GPs The BMA is the national voice of doctors and GPs. They negotiate on matters at a national level. They are a trade union which confers special legal connotations. Who are LMCs representing GPs to? They represent General Practice to everyone around GPs at a local level. That may be working with Area Teams, CCGs, RCGP, the LETB (Deanery) or charities. 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