



Ear Infection, Constipation, & Sleep Disturbance Resolves After Adjustments

The purpose of the study was to determine the effectiveness of chiropractic care on a patient with chronic otitis media. Otitis media is the inflammation of the middle ear. Otitis media affects those of all ages, but is most prominent among children and infants. Research has shown that by age four, 80% of children had been affected by otitis media.

The current study involved a case report of a 2-year-old female with a history of recurrent earaches. The patient's mother brought the patient to a doctor of chiropractic with the hope of avoiding a bilateral myringotomy (surgery where small tubes are inserted in both ears to allow air into the ears so that the fluid inside will either drain out or dry up). The patient's mother reported the patient had seen a pediatrician and ear-nose-throat specialist earlier that month. In just the past month, the patient had been prescribed amoxicillin for a double ear infection and Omnicef by the ear-nose-throat doctor.

Other relevant history included when the patient was one year old she suffered a head trauma from falling out of bed. That same year, the patient's mother reported the patient had emotional and behavioral issues, such as holding her breath while crying. One occasion involved the patient's eyes rolled back into her head and her parents rushed her to the ER. The patient was held overnight for testing, but nothing was found. During the chiropractic consultation, it was reported that the patient was also suffering from difficult bowel movements where she only had one per week and also restless sleep where she was waking up multiple times throughout the night.

Upon examination, the chiropractor found misalignments and restricted range of motion



(ROM) in the patient's neck. The patient began chiropractic care at a frequency of three times a week for four weeks. At each visit, the patient was checked for misalignments and had her neck adjusted with the use of a portable toggle headpiece and the Torque Release Technique (TRT; gentle adjustment of the target area). At the patient's first visit, the occiput (back of the patient's head) was adjusted. At subsequent visits, the patient's neck, middle back, and sacrum were adjusted. The patient was first re-assessed one month later (after 14 visits).

The patient reported being able to sleep through the night and that she had not had an ear infection since she started care five weeks prior. The patient's bowel movements had also increased to 2-3 per day and the patient's mother reported that the patient was happier overall. The patient's mother also reported that she had changed the patient's diet by eliminating dairy and adding daily supplements of probiotics and Vitamin D3.

The patient's second re-assessment was two months later on the patient's 26th visit. Since beginning care, the patient only had one illness which was a cold. The patient's second re-assessment was two months later on the

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patient's 26th visit. Since beginning care, the patient only had one illness which was a cold. The patient also did not need to take Tylenol or other antibiotics since starting care two months prior. The chiropractor removed the patient from the acute care phase and put the patient on one visit per week to support the patient's improved nervous system function. The patient's final re-assessment was two months later at the patient's 36th visit. The patient still reported being Tylenol and antibiotic free, and still maintained a happy disposition.

Overall, the patient's ear infections had completely resolved since the beginning of chiropractic care.

Steinberg, Bruce, & Doerr, Ashley. "Resolution of Chronic Otitis Media, Constipation & Sleep Disturbance Following Adjustment of Subluxations in a 2-year-old Child: A Case Study & Review of Literature." *Journal of Pediatric, Maternal, & Family Health*. 2016.4 (2016): 75-79. Print.

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