Evidence Table 3. Interventions

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| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-intervention(s):** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s):** | **Comments** |
| Abdullah et al., 19941 | Trimmed high-grade silicone shah permavent TT | Polyethylene conventional Shah TT | NA |  |
| Austin, 19942 | TT+ adenoidectomy  Flared polyethylene TT inserted into random ear  Tonsillectomy | Adenoidectomy  Tonsillectomy | NA |  |
| Brown et al., 19783 | TT+ adneoidectomy | Adenoidectomy | NA |  |
| D'Eredità and Shah, 20064 | Myringotomy using Contact diode laser + Adenoidectomy  CDLM was performed on both TMs in the antero-inferior quadrant.  Laser settings were 2 W power, 0.5 s pulse duration, with 5 pulses in the contact mode. The resultant myringotomy measured 2.5 mm. | Myringotomy + TT | NA |  |

Evidence Table 3. Interventions (continued)

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| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-intervention(s):** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s):** | **Comments** |
| Iwaki et al., 19985 | Shepard grommet tube  Adenoidectomy performed in those with mouth breathing and hyponasality and found to have hypertrophic adenoids; treatment with antibiotics if sinusitis present. | Silicone Good-T tube  Adenoidectomy performed in those with mouth breathing and hyponasality and found to have hypertrophic adenoids; treatment with antibiotics if sinusitis present | Silicone Paperella type II tube  Adenoidectomy performed in those with mouth breathing and hyponasality and found to have hypertrophic adenoids; treatment with antibiotics if sinusitis present | Adenoidectomy was performed at time of tube placement in 69 patients (50.4%) however distribution across treatment arms is NR. |
| Koopman et al., 20046 | Laser myringotomy  Power setting varied from 7-20 W; diameter of circulm. ar perforation : 1.8-2.6 mm. Fluid not aspirated. No antibiotics given.  Children in whom adenoidectomy was indicated underwent this procedure using a sharp curette according to guidelines. Otorrhea persisting for more than 1 week treated by eardrops of dexamethasone/framycetine/gramicidin or ofloxacin; otorrhea with fever treated with amoxicillin oral antibiotics. | TT inserted using cold-knife myringotomy  A Donaldson tube was used but in the  case of OME with atelectasis of the  middle ear, a Goode-T tube was  inserted.  Children in whom adenoidectomy was indicated underwent this procedure using a sharp curette according to guidelines. Otorrhea persisting for more than 1 week treated by eardrops ofdexamethasone/framycetine/gramicidin or ofloxacin; otorrhea with fever treated with amoxicillin oral antibiotics. | NA | Children who underwent andenoidectomy as a combined procedure: 97; Adenoidectomy + tonsillectomy: 1 |

Evidence Table 3. Interventions (continued)

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| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-intervention(s):** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s):** | **Comments** |
| Licameli et al., 20087 | Phophorylcholine coated fluroplastic Armstrong TT | Uncoated fluroplastic Armstrong TT | NA |  |
| Lildholdt, 19798 | TT + Adenoidectomy  If effusion was present, it was suctioned and a teflon coated Donaldson tube was palced anterially in TM | Adenoidectomy | NA |  |
| Mandel et al., 19899 | Myringotomy  In children without “significant” hearing loss | Myringotomy + Armstrong TT  In children without “significant” hearing loss | Watchful waiting  In children without “significant” hearing loss | G4: Myringotomy  In children with significant hearing loss  G5: Myringotomy + Armstrong TT  In children with significant hearing loss |

Evidence Table 3. Interventions (continued)

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| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-Interventions** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s)** | **Comments** |
| McRae et al.,198910 | Shah TT+ aspiration prior to TT placement  After myringotomy, glue was aspirated from the selected side using a microsucker. | Shah TT without aspiration prior to tube placement | NA |  |
| Ovesen et al., 200011 | TT + application of 0.5 ml of a Mucomyst solution 20 mg/ml in one ear after insertion of tubes | TT + application of 0.5 ml of a placebo in one ear | TT in contralateral ear, exclusively |  |
| Popova et al., 201012 | Fluroplastic Donaldson grommet +  adenoidectomy | Myringotomy + adenoidectomy | NA |  |

Evidence Table 3. Interventions (continued)

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| --- | --- | --- | --- | --- |
| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-intervention(s):** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s):** | **Comments** |
| Ragab, 200513 | Radiofrequency myringotomy + Mitomycin C  Topical mitomycin was applied to the tympanic membrane before radiofrequency tympanostomy. Mitomycin C application was performed using a saturated (not dripping) Gelfoam piece soaked in 0.4 mg/ml of mito- mycin C placed over the tympanic membrane for 10 minutes. The myringotomy (2–3 mm in diameter) was placed in the anteroinferior segment of the tympanic membrane.  Adenoidectomy in 26 patients (87%) | Radiofrequency myringotomy + Mitomycin C  The myringotomy (2–3 mm in diameter) was placed in the anteroinferior segment of the tympanic membrane.  Adenoidectomy in 29 patients (97%) | NA |  |
| Shishegar and Hoghoghi, 200714 | Adenoidectomy + myringotomy  Ten day courses of ammoxicillin therapy (75 mg/day in 3 doses) prescribed for all patients post-operatively | Adenoidectomy + myringotomy + TT  Ten day courses of ammoxicillin therapy (75 mg/day in 3 doses) prescribed for all patients post-operatively | NA |  |

Evidence Table 3. Interventions (continued)

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| --- | --- | --- | --- | --- |
| **Author, Year** | **Group 1**  **Intervention Specification**  **Co-intervention(s):** | **Group 2**  **Intervention specification**  **Co-intervention(s):** | **Group 3 Intervention specification**  **Co-intervention(s):** | **Comments** |
| Slack et al., 198722 | Shepard tube | Shah tube | Paprella tube | G4: Goode tubes  G5: Reuter Bobbin tubes  G6: Unknown or other tube type |
| Szeremeta et al., 200016 | Laser Myringotomy + adenoidectomy  Using CO2 laser | Incisional, cold knife Myringotomy + adenoidectomy | NA |  |
| Tos and Stangerup, 198917 | Right sided -Donaldson type TT  + adenoidectomy  Evaculation of MEE | Myringotomy + adenoidectomy  Evaculation of ME effucion |  |  |
| Vlastos et al., 201118 | Shepard type TT + adenoidectomy  Cold steel tonsillectomy | Myringotomy + adenoidectomy  Cold steel tonsillectomy |  |  |
| Wielinga et al., 199019 | Teflon bevelled Armstrong TT  1.15 mm internal diameter and 7.5 mm length TT were used | Silicon Goode TT |  |  |
| Williamson et al., 200920  Williamson et al., 200921 | Mometasone furoate nasal spray  Nasal spray with 140, 50 um doses of mometesone to be administered once per day for 1 month. Total time taking steroid was 3 mos.  Support call from staff | Placebo | NA |  |