Memo Sheet
Purulent acute otitis media in children over 3 months
November 2016

The purpose of this memo sheet is to promote the appropriate prescription of antibiotics to reduce bacterial resistance, which may lead to therapeutic impasses. The choice of antibiotic, its dose and its dosage are factors to consider for a suitable prescription.

→ In case of congestive or seromucinous acute otitis media: no antibiotics.

→ In case of purulent acute otitis media:
  - **children < 2 years**: amoxicillin, 80 or 90 mg/kg/day, for 8-10 days.
    - If conjunctivitis-otitis syndrome: amoxicillin-clavulanic acid, 80 mg/kg/day, for 8-10 days,
    - In case of allergy to penicillins without contraindication to cephalosporins, the recommended treatment is cefpodoxime proxetil, 8 mg/kg/day, for 8-10 days,
  - In case of contraindication to beta-lactam antibiotics:
    - erythromycin, 50 mg/kg/day + sulfafurazole, 150 mg/kg/day, for 10 days,
    - sulfamethoxazole, 30 mg/kg/day + trimethoprim, 6 mg/kg/day, for 8-10 days.
  - **children > 2 years with mild symptoms**: no antibiotics;
  - **children > 2 years with severe symptoms**: amoxicillin, 80 or 90 mg/kg/day, for 5 days.
    - If conjunctivitis-otitis syndrome: amoxicillin-clavulanic acid, 80 mg/kg/day, for 8-10 days,
    - In case of allergy to penicillins without contraindication to cephalosporins, the recommended treatment is cefpodoxime proxetil, 8 mg/kg/day, for 5 days,
    - In case of contraindication to beta-lactam antibiotics:
      - erythromycin, 50 mg/kg/day + sulfafurazole, 150 mg/kg/day, for 10 days,
      - sulfamethoxazole, 30 mg/kg/day + trimethoprim, 6 mg/kg/day, for 5 days.