The high price children pay for untreated ear infections

Ear infections are often dismissed as minor ailments, but when left untreated, they can cause hearing loss, speech delays, and lifelong challenges. Many children in Uganda are silently paying the price for infections that could have been easily treated.

BY BEATRICE NAKIBUUKA

Each year on March 3, the world observes World Hearing Day, led by the World Health Organisation (WHO), to raise awareness about deafness and hearing loss. The 2026 theme, "From communities to the classroom: Hearing care for all children," urges families, communities, and governments to prioritise ear health and challenge harmful myths about hearing loss. In Uganda, however, many children continue to suffer from preventable ear damage, often detected far too late.

Hearing loss in Uganda is a silent crisis affecting thousands of children. For many families, the first warning signs appear when a child delays speech, does not respond to their name, or struggles to follow lessons at school. By the time these signs are noticed, precious opportunities for early intervention may have already passed.

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ENT SPECIALISTS IN UGANDA

A personal journey

I know this reality all too well. As a child, I dreaded catching a cold or a cough because it almost always led to an infection in my left ear. My mother tried everything she could; she was told I had "got breast milk in my ears" and even used local herbs, but the infections kept coming back. The pus discharge lingered for weeks at a time and sometimes turned bloody. At school, I felt embarrassed and isolated.

Years later, a friend recommended an ear specialist. After examination, I was told my eardrum had been perforated by repeated infections, and I needed surgery to prevent further damage and possible total hearing loss. The journey to that surgery was not easy. Flu and cough episodes continued to inflame the middle ear, and I went through multiple audiology tests and consultations.

When the operation was finally done, my eardrum was repaired and much of my hearing restored. But I often reflect on one painful truth: if the infection had been properly managed early in my childhood, surgery might never have been necessary. Unfortunately, many Ugandan children face the same delayed intervention, often ending up with permanent hearing loss.

The epidemic behind "Okwatika Amatu"

Experts say most childhood hearing loss in Uganda is preventable or treatable if detected early. Dr Doreen Nakku, president of the Otolaryngology Society of Uganda (OSU), explains that otitis media, an infection of the middle ear, is the leading cause. The middle ear is a small, air-filled space behind the eardrum essential for hearing. Young children are especially vulnerable because their immune systems are still developing and they are prone to respiratory infections such as the flu and cough.

When such infections occur, airflow through the Eustachian tube, the canal connecting the ear to the nose and throat, is disrupted. Fluid accumulates, and repeated infections or allergies can turn it into pus. Pressure builds, and the pus often bursts through the eardrum. In many communities, this condition is called "*okwatika amatu*," with myths suggesting breast milk in the ear causes it. Dr Nakku clarifies this is not true; untreated infections and delayed medical care are usually to blame.

Preventable causes

Not all hearing problems are permanent. Wax buildup can block sound, and small objects lodged in the ear, like beads or seeds, can cause damage if not removed properly. Certain medicines, including quinine for malaria, may affect hearing, and complications from illnesses such as meningitis or cancer treatments can also contribute. Open discussion about these risks and careful monitoring of children who have suffered serious infections or taken strong medications are essential.

Congenital hearing loss

Some children are born with hearing impairment due to maternal infections during pregnancy or malformations in the ear. In high-income countries, newborn hearing screening is routine, allowing diagnosis within the first month of life and interventions by six months. Early detection improves speech development, learning, and social integration.

In Uganda, however, newborn screening is not standard in public facilities, and only a few private hospitals provide it. As a result, congenital hearing loss is often diagnosed late, sometimes only when children fail to develop speech. Misunderstandings are common, with children labelled stubborn, slow learners, or even bewitched, when the reality is that they simply cannot hear.

Community practices that increase risk

Several factors in our communities make ear infections more likely. Children living in crowded households are more exposed to infections, while cigarette smoke irritates the nose and throat, increasing susceptibility. Bottle feeding practices can also contribute; when babies feed lying flat, milk may flow into the nasal passages connected to the ear, causing inflammation.

Unsafe ear-cleaning practices, such as inserting cotton buds, hairpins, or even applying local herbs, can damage delicate ear structures. Parents are urged to seek medical care promptly if a child experiences ear pain, discharge, or difficulty hearing, and to request hearing screening when possible.

A shortage of specialists

Uganda has only about 60 ENT specialists, most based in urban areas, leaving rural populations underserved. Strengthening primary healthcare, training frontline health workers to spot early signs of hearing loss, and expanding access to hearing screening are urgent priorities. Families and communities must also challenge myths and unsafe practices, helping children grow up with healthy hearing.

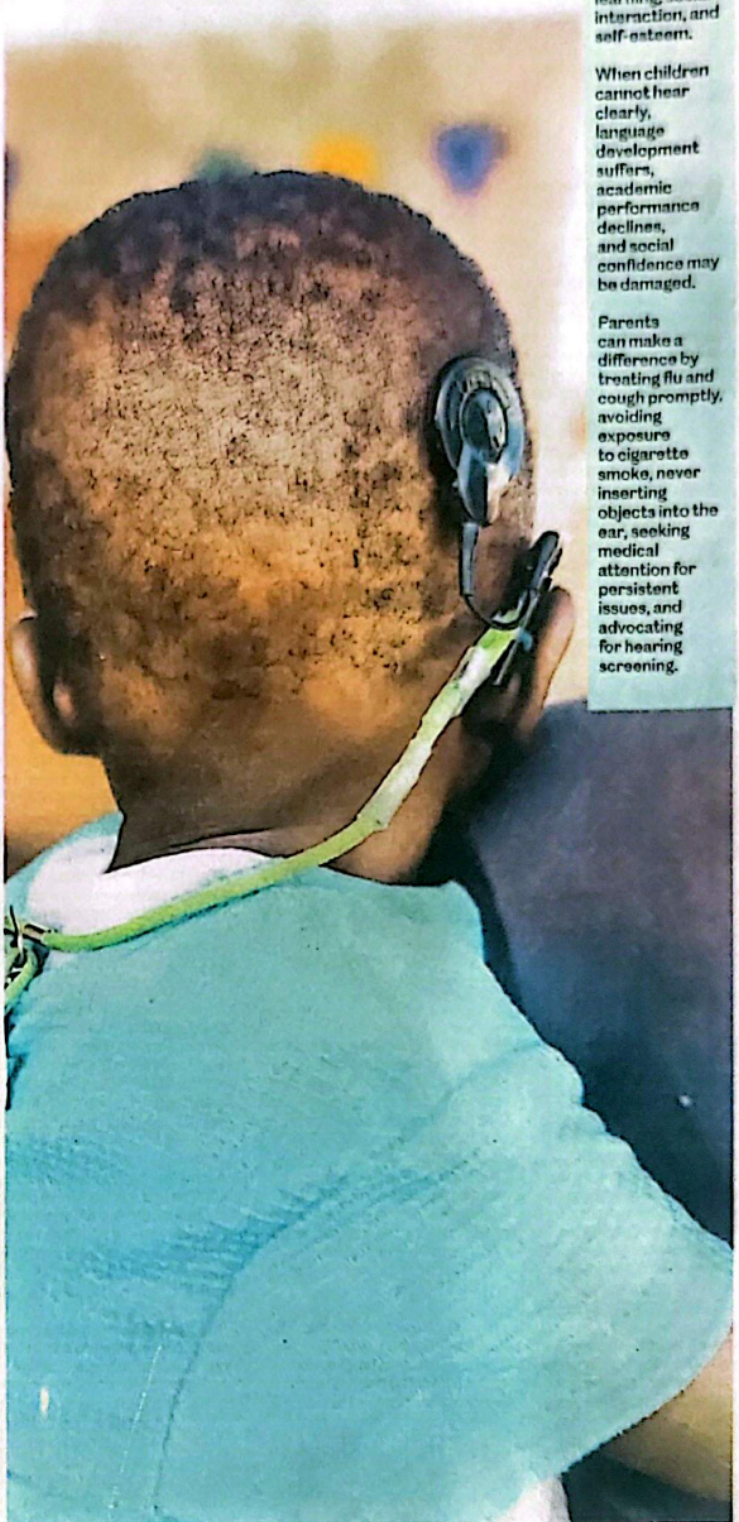
World Hearing Day 2026 sends a clear message: chronic ear discharge must not be normalised, myths about breast milk and herbal remedies must be challenged, and no child should grow up in preventable silence.

CHANGING MINDSETS

Untreated hearing loss has lifelong consequences. Hearing is essential for speech, learning, social interaction, and self-esteem.

When children cannot hear clearly, language development suffers, academic performance declines, and social confidence may be damaged.

Parents can make a difference by treating flu and cough promptly, avoiding exposure to cigarette smoke, never inserting objects into the ear, seeking medical attention for persistent issues, and advocating for hearing screening.



Experts say most childhood hearing loss in Uganda is preventable or treatable if detected early. PHOTO/PEXELS.COM.