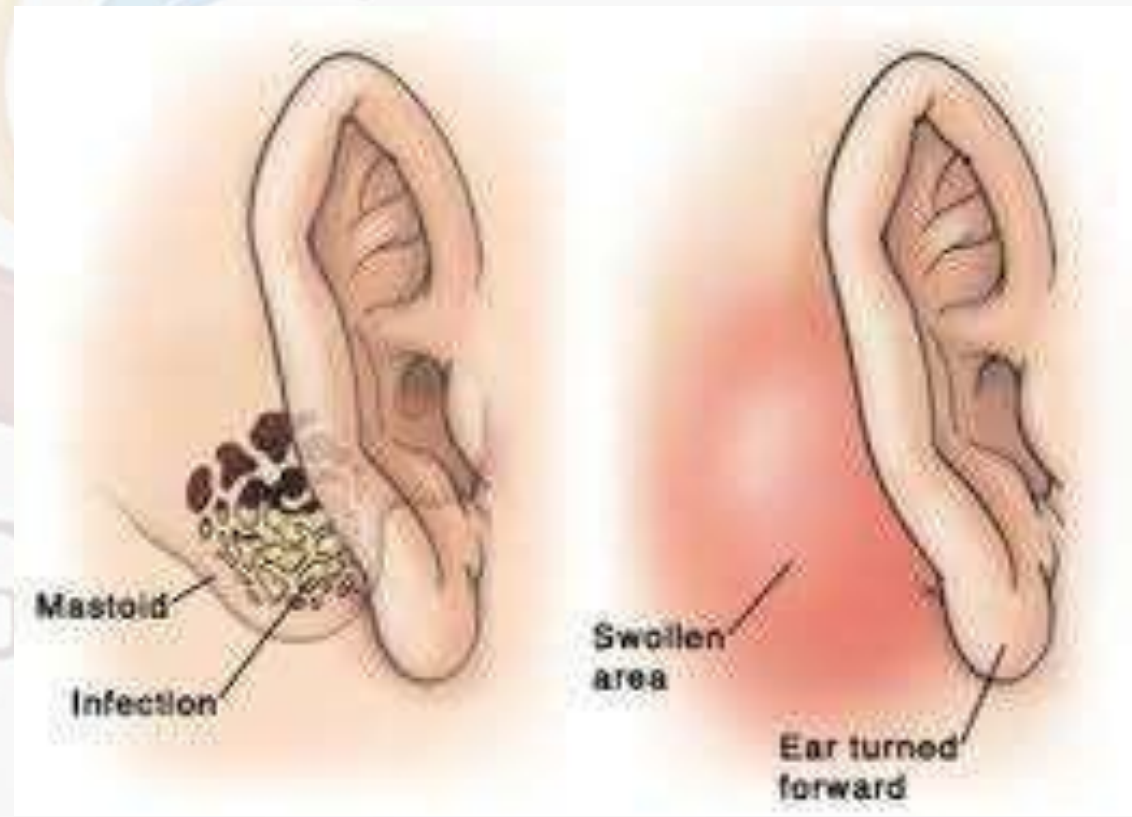
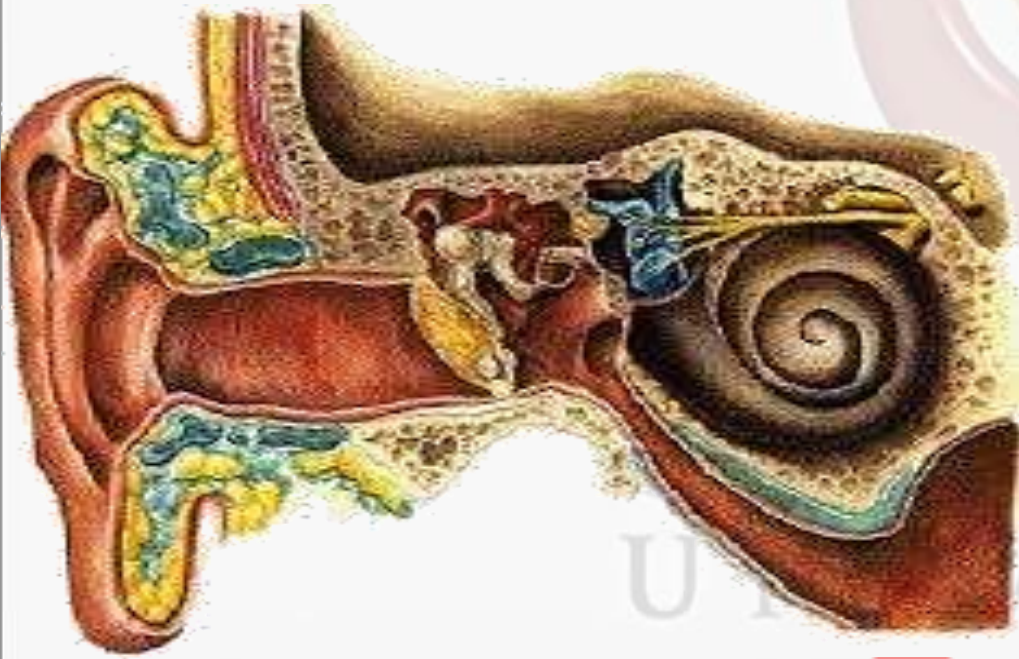


MASTOIDITIS.



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INTRODUCTION

Mastoid process is the portion of temporal bones of skull that is behind the ear which contains. Open air containing spaces. It is usually cause by untreated middle ear infection and it is leading cause of child mortality.

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DEFINITION

It is an inflammation of mastoid process behind the ear and of the air space connecting it to the cavity of the middle ear.



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1. Infection of the middle ear.
2. Injury of the mastoid bone and cells.
3. Upper respiratory infection.
 - Rhinitis.
 - Sinusitis.
4. Related to zygoma fractures.



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PA HOPHYSIOLOGY. PATHOPHYSIOLOGY.



Due to Infection.



Acute otitis media



Chronic otitis media



Mastoiditis.

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SIGN AND SYMPTOMS.

- ❖ **Otalgia (ear pain)**
- ❖ **Swelling of the mastoid bone.**
- ❖ **Loss of hearing.**
- ❖ **Sever pain at eating time.**
- ❖ **Painless discharge from the effected ear.**
- ❖ **Nausea, vomiting.**
- ❖ **Increased cranial pressure.**
- ❖ **Otorrhoea (purulent discharge.) may be odourless or foul smelling.**
- ❖ **Perforation of the ear drum.**





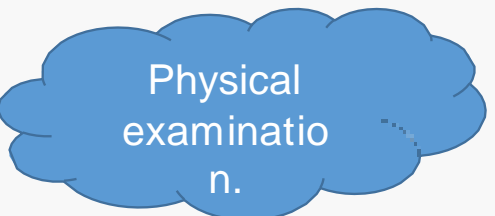
**DIAGONSTIC
EVALUATION**



History
Taking



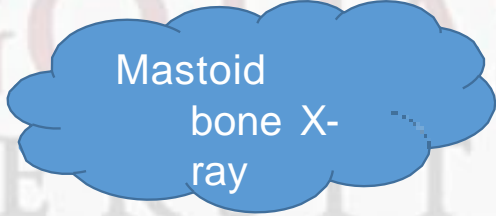
C.T.
Scan



Physical
examination.



M
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Mastoid
bone X-
ray



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MEDICAL
MANAGEMENT

- 
1. Antibiotic and steroid ear drop for infection and inflammation.
E.g., Ciplox-D
 2. Ear- Irrigation – for purulent drainage.
 3. Analgesic drugs, e.g., Aspirin, Nimuslide.

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**SURGICAL
MANAGEMENT**

Mastoidectomy : Surgical removal of mastoidectomy.

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**NURSING
MANAGEMENT**

1. Pain related to physical factors.
2. Impaired auditory sensory perception related to partial / total perforation of tympanic membrane.
3. Impaired verbal communication related to hearing deficit.
4. High risk for infection related to tissue destruction and chronic disease.
5. High risk for trauma related to balance difficulties.



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NURSING INTERVENTION

- Assess pain for location, intensity, etc.
- Provide plenty of fluids 1.5 – 2 litres / day
- Use cold water sponging to reduce body temperature.
- Encourage patients and family to use signs of non verbal languages, e,g, facial expression, pointing, body movement and other communication.
- Administration analgesics as prescribed to relieve pain, antibiotics and antipyretics as ordered.
- Instruct family or the people closest to the patient on how techniques of effective communication so that they can interact with patients.



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THANK YOU.



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