



Referred Otalgia

This means ear pain that is not caused by the ear. The external and middle ear exam will be normal. In this situation, ear pain is referred from another location. Ear pain may be part of a headache syndrome. Throat and neck problems may refer pain up to the ear. A sore throat will frequently refer pain to the ear. A thorough throat evaluation may be necessary to rule out a lesion/tumor. This is especially true for those that smoke. This evaluation may include office endoscopy. Neck nerve pain problems may refer pain to the ear. Esophageal reflux may refer pain to the ear. Ear pain associated with physical exertion may indicate cardiovascular problems. The most common reason for referred otalgia is jaw joint and jaw muscle problems. This is commonly called TMJ. Treatment includes over the counter anti-inflammatories (ibuprofen or ketoprofen), a soft food diet, no chewing gum, and a dental consult. The dental consult is to obtain a dental occlusal splint. This is worn at night and helps to relieve strain on the jaw joint. Ibuprofen dosage is 600 to 800 milligrams three times a day for two weeks. If ear pain has been present for over one month and no obvious cause is evident on history or physical exam, a CT or MRI scan may be necessary. This is to rule out a lesion/tumor/growth that is not evident on physical exam. If no cause is determined after complete evaluation, pain management medications may be appropriate.