Role of Septilin in Chronic Tonsillitis and Chronic Otitis Media in Children

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ABSTRACT
Twenty-five chronic cases of otitis media and another 25 of chronic tonsillitis were treated with Septilin syrup. All the patients were young children aged between 4 to 12 years, with recurrent attacks within 2-4 weeks.

Therapy varied from 4-6 weeks. All the children were followed up for 3 months.

In nearly 70% of cases there were no recurrences. No side-effects or toxicity were observed with Septilin syrup.

INTRODUCTION
Otitis media and tonsillitis are two common problems in children that an otorhinolaryngologist comes across frequently. Recurrence and chronicity are the commonest complications in spite of effective chemotherapeutic management of the acute attacks. Long-term remission is not achieved on short-term antibiotic courses. Besides, most drugs have troublesome side-effects on prolonged use. Hence the need for an effective and safe treatment suitable for long-term use has always been felt. Till date there is no single drug with antibacterial, anti-inflammatory and anti-allergic properties, which has no side-effects on long-term use.

Septilin is an indigenous compound containing antibacterial and anti-inflammatory plant principles which provide power to build up resistance against infections in the mucosa. Moreover it is chemically distinct from all other clinically available antibiotics. It is claimed that long-term use of Septilin is very effective in chronic infections, especially those of the upper respiratory tract and ear, thus avoiding the need for surgery in a good number of cases.

MATERIAL AND METHODS
Twenty-five cases of chronic tonsillitis (Group A) and 25 cases of chronic otitis media (Group B) between the ages of 4 to 12 years were selected at random from the ENT outdoor department of the General Hospital, Sector 16, Chandigarh from 5.2.86 to 4.8.86. Their ages, sex, duration of symptoms as also the chronicity of the illness were noted. (See Table 1).

<table>
<thead>
<tr>
<th>Table 1: Showing the ages, sex, duration and chronicity</th>
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<tr>
<td>Group A (Chronic tonsillitis)</td>
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<tr>
<td>Group B (Chronic otitis media)</td>
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The following criteria were used for including the subjects in the study.
Group A (Chronic tonsillitis)
(a) Age range of 4 to 12 ears
(b) Repeated attacks of fever with sore throat and/or vomiting
(c) Repeated attacks of cough
(d) Signs of hypertrophied tonsils on physical examination
(e) Recurrence of attacks within 2-4 weeks
(f) Three or more attacks during a period of 3 months prior to inclusion in the study
(g) A raised TLC and DLC
(h) Subjects had received 2 or more courses of antibiotics

Group B (Chronic otitis media)
(a) Age range of 4 to 12 years
(b) Repeated attacks of ear discharge and pain in one or both ears
(c) Signs of wet ears and/or perforated ear drums (one or both)
(d) Recurrence of attacks every 2-4 weeks
(e) A minimum of two attacks during a period of 3 months prior to inclusion in the study
(f) A raised TLC and DLC
(g) Subjects had received 2 or more courses of antibiotics.

During the acute attacks the patients were treated with antibiotics and antipyretics along with decongestants and antibiotic ear drops in addition to Septilin syrup. Once the acute phase was over all the patients were put on Septilin syrup alone in the following dosages:

4 to 6 years ... ½ tsp. t.i.d.
6 to 8 years ... 1 tsp. b.i.d.
8 to 12 years ... 1 tsp. t.i.d.

Therapy varied from 4-6 weeks. All the patients were followed up for a period of 3 months after they completed the course of Septilin syrup.

RESULTS (See Table 2)

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<tr>
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<th>Cases</th>
<th>No recurrence</th>
<th>Delayed recurrence</th>
<th>No improvement</th>
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<tbody>
<tr>
<td>Group A (Chronic tonsillitis)</td>
<td>24</td>
<td>16 (66.66%)</td>
<td>6 (25%)</td>
<td>2 (8.33%)</td>
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<tr>
<td>Group B (Chronic otitis media)</td>
<td>25</td>
<td>18 (72.0%)</td>
<td>5 (20%)</td>
<td>2 (8.0%)</td>
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Group A (Chronic tonsillitis)
- Sixteen patients did not get any recurrence till the end of the study
- Six patients had recurrence 6-8 weeks after the onset of study (original recurrence 2-4 weeks)
- Two cases had recurrence 2-3 weeks after the onset of the study
- One case dropped out because of irregular follow-up
- No side-effects or toxic effects were observed with Septilin

Group B (Chronic otitis media)
• Eighteen cases were symptom-free till the end of the study
• Five cases had recurrence 4-8 weeks after the beginning of the treatment (original recurrence 2-4 weeks)
• Two patients had recurrence 2-4 weeks after the onset of the study.

One patient had urticarial rash during the study. It is not certain if the rash was due to Septilin or there was some other concurrent cause for it. But this was controlled by giving antihistamines. Septilin was discontinued.

CONCLUSION
Recurrence in chronic tonsillitis and chronic otitis media are extremely common in children after treatment with antibiotics and decongestants. The present study shows that these can be minimised with the use of Septilin syrup for a period of 4-6 weeks. No side-effects were observed. So it is assumed that Septilin syrup can be safely administered for long duration.