

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9470180/pdf/0680661.pdf>

The article that I selected is titled “Ear-Piercing Complications in Children and Adolescents”. Ear piercings are the most common forms of body modification and are prevalent among the children and adolescent population. The typical age of first piercing among young children ranges from 6 months to 10 years. Most common sites of piercings include the ear lobe, and also the cartilage of the pinna. A cross sectional survey was conducted in 766 college students from 18 universities in the US and Australia and it was reported that 51% had body piercings with almost half of them reporting localized infections consisting of pus, blisters, drainage, pain, and redness. It was also conducted that there was a higher prevalence of infection in piercing of the ear cartilage and this could be due to the lack of vascularity of the cartilage.

A common complication that arises from piercings includes embedded earrings which are common in ear lobe piercings of patients with young thick fleshy earlobes. A small incision with local anesthesia may be necessary to remove the earring if it can't be removed with gentle probing. Another complication that is prevalent in the pediatric population is a nickel-allergic contact dermatitis. It is the most common delayed-type (type IV) cutaneous hypersensitivity reaction. Replacement with hypoallergenic earrings, avoiding nickel containing products, and applying topical corticosteroids are key to managing symptoms.

Prevention of post piercing complications includes the use of appropriate aseptic technique and daily cleaning with antiseptic solution until the hole is completely epithelialized. The American Academy of Pediatrics recommends postponing piercing decisions until children are mature enough to care for the pierced sites themselves. Individuals who are at higher risk of infections (diabetes, allergy history, etc..) should consult their health care providers prior to the piercing.