Primary otitis media in the course of tularemia is very rare. As unexpected and resistant to commonly used empirical antibiotic therapy, it may constitute a diagnostic and therapeutic challenge.

Tularemia is a rare infectious zoonotic disease caused by Francisella tularensis, an aerobic and fastidious gram-negative bacterium. The symptoms vary, depending on how a person was exposed to it. The typical presentation is a sudden onset with high fever and local lymphadenopathy. Ulceroglandular tularemia with a skin ulcer, swollen painful lymph glands and soft tissue lesions is the most common form of the disease (95% of all cases in Europe).

Objectives
The purpose of this report is to present retrospectively a case of a patient with tularemia infection in the middle ear.

Methods
A 17-month-old boy was admitted to Department of ENT, Head and Neck Surgery on the grounds of acute otitis media of the right ear. It was ascertained that the boy had had a catarrhal infection and the temperature of 38 °C for five days previously. On admittance the child was drowsy and pyrexial (38 °C), in fair condition, with enlarged neck lymph nodes. He had paracentesis with ventilation drainage performed. Empirical antibiotic therapy (amoxicillin/clavulanic acid) was administered.

Results
Ear swab indicated an infection caused by the bacterium Francisella tularensis. Target antibiotic therapy (vancomycin) improved the patient’s general and local condition. In control blood test crp was 0.97 mg/l and wbc 11.57 x10⁹/L.