



Conditions and surgery of the ear - UNDER REVIEW

General information on ear surgery

A surgeon will take different approaches to the various parts of the ear in order to obtain access to the disease. Some operations can be carried out via the ear canal without the need for any other incision around the ear. This route is known as a permeal or transmeal approach. It is used for such conditions as otosclerosis or the insertion of grommets as well as some newer techniques of administering drugs to the inner ear in vertigo. However, more frequently an incision around the ear is required to allow greater access to the middle ear, mastoid or inner ear. Sometimes this may be carried out through an incision just in front of the ear (endaural incision).

A common alternative to this route, which gives even greater exposure, is a post-aural incision which means an incision through the skin behind the ear.

Potential complications and results

All ear surgery carries potential dangers or complications. While these risks are usually very low, in certain types of surgery the risk is increased. You should be informed of these risks before embarking upon surgery so that you are clear on the implications of any operation.

The main risks are those of total hearing loss in the operated ear. Dizziness and tinnitus may result from surgery and paralysis or weakness of the muscles of the face may also occur as may disturbance of taste to one side of the tongue.

These complications may be either temporary or permanent. With modern techniques of surgery the risks are low. Many ear diseases, if left untreated, can result in the same complications.

The results or success of surgery on the ear may in certain instances be known instantly, for example following the insertion of grommets. However in many other cases the results do not become apparent until several weeks following surgery due to the healing process that is taking place. This is particularly true following the reconstruction of hearing.

After the operation

Following ear surgery the patient will have a head bandage in order to compress the area of the operation and prevent the collection of blood underneath the wound. Normally the head bandage will remain in place for 24 or 48 hours, but in cases such as in the correction of the external ear, or bat ear, they may be left in place for up to two weeks. Once the head bandage has been removed, usually there will be 'packing' in the

ear canal which will also need to be removed. It is often thought that this is a painful process but generally speaking it is easily accomplished without any significant discomfort.

Stitches from the incisions are generally removed between one and two weeks postoperatively at the same time as removal of the packing if the stitches are not dissolvable.

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FEEDBACK SURVEY



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