PROTRUDING EAR

(BAT EAR, LOP EAR)

Risks, Complications and Post-operative Instructions

Protruding ears are a common occurrence that frequently causes embarrassment to the owner, being the subject of juvenile taunts or later self-image difficulty.

Protrusions follow four main patterns. The external ear is comprised of typical skin and cartilage contours that vary only slightly in the great majority of individuals. Aberrations of the fold within the outer “helical” structure produce protrusion.

The most common is excessive depth of the cartilage that forms the bowl (cocha) of the ear, which causes the ear to stand out from the scalp.

The second, often accompanying a deep bowl, is an undeveloped superior crus cartilage. This results in the upper ear folding forwards and outwards, exacerbating the prominence of an accompanying deep bowl.

The third is a less common fold-over of the helix, forming a “Lop ear”.

Lastly, the upper cartilage of the ear may be over-developed, causing an “elephant ear” appearance.

 Whilst the protrusion incurs no medical risk, for many they represent a cosmetic drawback that is subject to social or psychological stress, best avoided by surgical repair. For children this is best before the school years, but adult treatment is nonetheless a common procedure.

Correction of the first variety requires excision of part of the deep bowl, via an incision behind the ear. The reduced bowl then settles closer to the skull, minimising the protrusion.

The second (superior crus) procedure follows similar lines; bowl reduction is a common initial step. To recreate the contour of the superior crus, the cartilage is reshaped by weakening the cartilage and then suturing the result into the appropriate contour.

The last two problems are more complex to correct. The “lop” variety may require reinforcing grafts; the enlarged pinna, complex reduction.
More information

- Protruding ears

RISKS AND COMPLICATIONS

Fortunately. There are few vital structures within the ear, and the tissues are highly vascular, which promotes rapid healing.

Scarring, aberrant healing

Generally healing is uneventful, but unusual scarring or tissue/contour misalignment from aberrant healing processes may occur, albeit very uncommon.

Infection, Pain

The nature of surgery predisposes to general surgical risks but fortunately the ear is generally not troubled by these problems to a severe or prolonged extent.

It is common for the upper ear to feel numb for up to two months

Uncommonly, a collection of blood may form under the wound. This may cause more noticeable swelling and discomfort.

POSTOPERATIVE INSTRUCTIONS

Surgical wound site

After surgery, a head bandage is applied to allow the tissue to heal in place. It is important to prevent its removal by a child. The bandage is removed after a week. The skin sutures behind the ear are soluble, not requiring removal.

The site may be washed thereafter. Normally a degree of swelling may cause the ear skin to be slightly thickened. This fades over two weeks.

Antibiotics will be prescribed and provided prior to discharge. Take these as directed on the packet. Sometimes diarrhoea may occur; consult your pharmacist re medicine for this, but continue the antibiotics and take probiotics to help settle matters.
Pain, Discomfort

Analgesics will be given both in hospital and supplied at discharge. Pain after ear surgery is normally limited, but if concerned, contact us for advice. Some intermittent stabbing type pain may be experienced; this fades in a few weeks. Nausea may occur, but advise our staff if this occurs.

Activities

- Rest well after surgery; recovery varies from person to person.
- Remain active, within one’s comfort zone. Return to full exercise after a week, if well. Return to work when well recovered.

Our goal with the surgery is to deliver the best results with the greatest certainty and minimal distress. But in surgery there are no guarantees of success. If you have had a lesser result after surgery, we will do our best to treat the problem, hopefully overcoming this.

Please let is know at Queensland Otology if you have any concerns or questions, whether before or after:

Contact Numbers

Business Hours: (07) 3839 7677
After hours: (07) 3261 9570