

Ear Surgery (Otoplasty)

The goals of ear surgery are to move prominent ears closer to the head and/or to make ears more attractive by reducing their size or improving their shape.

About ear surgery

Most people's ears lie at an angle of 15 degrees from the head. In some cases, though, the ears stand out at a greater angle and appear more prominent than they should.

If you were born with prominent ears you were probably teased about them as a child. As an adult, you may try to cover them by wearing your hair long.

In newborns, prominent or "bat" ears may be corrected by gently taping the ears to the side of the head or by having the baby wear a cap. If the problem is not dealt with in infancy, however, it can only be corrected by surgery. Ears attain 80% of their final size by age four and it is quite safe to carry out ear surgery from that age onwards.

Surgery to correct prominent ears is one of the most common and satisfying forms of aesthetic surgery. The results are usually excellent and lasting, giving patients a natural appearance and increased confidence.

Your consultation

During your consultation, your surgeon will ask about your medical history and any previous ear surgery you may have had. He will also point out the normal asymmetry of your ears, something you have probably never noticed.

This asymmetry is caused by differences in the size and shape of your ears and in the shape of your skull where the ears sit. One of the goals of your surgery will be to improve this asymmetry, although it will never be perfect.

Your operation: what to expect

It is recommended that ear surgery in children be conducted under general anaesthetic. In adults it may be performed under general or local anaesthetic and may be carried out at the same time as most other facial surgeries.

The incisions are generally placed behind the ear. The cartilage of the ear is then remodeled and, in some cases, portions of it may be removed. There are several techniques for correcting the shape of the ears. Your surgeon will have discussed these with you at your consultation.

If your surgery is done under local anaesthetic, you will be able to use a small mirror to examine the progress of the surgery to make sure you are pleased with the correction achieved. It is also possible to fine-tune the degree of correction and the reshaping of the top and central part of the ear or the earlobe.

Once surgery is complete, the wound is closed with absorbable sutures which will not require removal.

After your surgery

When your surgery is completed, your ears will be individually covered with small dressings, which are usually worn for one week.

Following your surgery you will be advised to wear a tennis headband for eight weeks at night and during any contact sports. This is to prevent your ears from being pushed forward while they are still settling. During the first week after surgery, this headband should be worn on top of the ear dressings.

There are a number of things of which you should be aware during this period.

- It is normal to feel moderate discomfort following your surgery. This may be controlled by mild analgesics such as Paracetamol. It is important to avoid aspirin during this time.
- When your dressings are removed you may notice some bruising and swelling. This should settle rapidly within a week or two and the improvement in the prominence of your ears will become apparent.
- Numbness is fairly common but your ears will eventually return to normal.
- Mild infection around the stitch line is possible but this is usually resolved quite quickly.

During surgery, particular care is taken to stop any bleeding from the small blood vessels divided by the procedure. Occasionally, however, a small blood vessel will leak after surgery is complete. This bleeding, which is rare, may necessitate a return to the theatre.

In the two months following surgery your ears will “set in,” changing shape by a millimeter or two. It is relatively rare to experience a more significant loss of correction. Should this happen, it can be readily corrected under local anaesthetic.

More Information

Naturally, there will be many questions you will want to ask before making any decisions about undergoing surgery. Also you will wish to meet your Surgeon - having trust and confidence in one's Surgeon is very important.

Surgery is unique to every patient and a detailed discussion and assessment between you and your Consulting Surgeon is essential in enabling you to make a decision based on correct personal information and advice.

Arranging a medical consultation does not obligate you to anything other than attending the appointment. There is no obligation to proceed with treatment. This is entirely a matter for your decision, after the surgeon has decided on the feasibility and accepted you as suitable.

If you would like to know more information we will be happy to answer any queries either by email, letter or telephone, so please do not hesitate to get in touch.