

Surgeon - Dr. Manoj Kumar

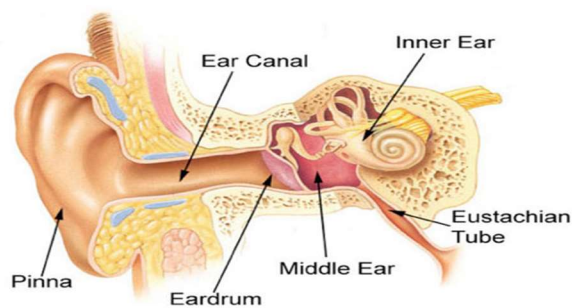
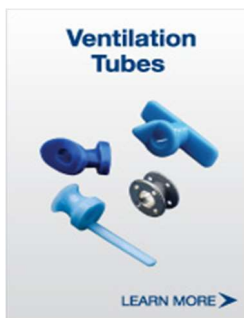
Date of Procedure _____

Ear Tubes

Most ear infections either resolve themselves on their own (viral) or need to be treated by antibiotics (bacterial). Sometimes ear infections and/or fluids in the middle ear may become a chronic problem which can lead to hearing loss, behavior, and speech problems. In these cases, insertion of an ear tube placed by an ear, nose, and throat specialist may be indicated.

What are ear tubes?

Ear tubes are tiny cylinders placed through the ear drum (tympanic membrane) to allow air in the middle ear. They may also be called tympanostomy tubes, myringotomy tubes, ventilation tubes, or PE (pressure equalization) tubes. The tubes are small plastic or metal tubes similar in shape to an empty spool of thread. There are two types of ear tubes: short-term and long-term. Short-term tubes are smaller and generally stay in place for six months to a year before falling out on their own. Long-term tubes are larger and have flanges that secure them in place for a longer period of time. Long-term tubes may fall out on their own, but surgical removal is often necessary.



Who needs ear tubes?

- Ear tubes are often recommended when a person has repeated middle ear infections.
- Patients who experience hearing loss caused by persistent presence of middle ear fluid (otitis media with effusion).

These conditions most commonly occur in children, but can also be present in older patients. They can also lead to speech and balance problems, hearing loss, or changes in the structure of the ear drum.

What are the benefits of ear tubes?

- Reduce the risk of future ear infections
- Restore hearing loss caused by middle ear fluid
- Improve speech problems and balance problems

Ear tube surgery

A light general anesthesia is administered for this procedure. A small incision is made and the fluid behind the eardrum is suctioned out. The ear tube is then inserted in the opening using a microscope for visualization. Ear drops may be administered after the ear tube is placed and may be necessary for a few days. A cotton ball may be placed in the ear

canal but will usually fall out within the first few hours after surgery. The procedure usually lasts less than 15 minutes and the patients awaken quickly. You are usually discharged within 1 hour following this procedure. Most patients are at the Cortland Surgical Center for less than 3 hours from start to finish for Ear Tube Surgery.

What should I expect after surgery?

After surgery the patient is monitored in the recovery room and will usually go home within an hour if no complications are present. Patients usually experience little or no post-operative pain but grogginess, irritability, and/or nausea from the anesthesia can occur temporarily. It is *common* to have a small amount of blood come from the ear after ear tube surgery. This should stop within a few days. Hearing loss caused by the presence of fluid is usually resolved by surgery. Sometimes children can hear so much better that they often complain that normal sound seems too loud. The cotton ball placed in the ear canal during the procedure will usually fall out within the first few hours after surgery.

To avoid the possibility of bacteria entering the middle ear through the tube we recommend keeping the ears dry for the first two weeks after tube insertion. Earplugs or cotton balls coated in Vaseline should be used to keep ears dry and free of *any* water. After the first two weeks, protecting the ear may not be necessary **EXCEPT** when diving, or engaging in activities in unclean (non-chlorinated) water such as ponds, lakes, rivers, and oceans. Keep fingers and tip's from entering the ear canal at all times.

A follow up appointment will be made in the Physicians' office to check on hearing and healing progress. This appointment is usually scheduled at 6 weeks' post-procedure.

Possible complications

Myringotomy with insertion of ear tubes is an extremely common and safe procedure with minimal complications. When complications do occur, they may include:

Perforation - This can happen when a tube comes out or a long-term tube is removed and the hole in the tympanic membrane (ear drum) does not close. The hole can be patched through a minor surgical procedure called a Tympanoplasty or Myringoplasty.

Scarring - Any irritation of the ear drum (recurrent ear infections), including repeated insertion of ear tubes, can cause scarring. In most cases this causes no problems with hearing.

Infection - Ear infections can still occur in the middle ear or around the ear tube. Drainage from ears can indicate infection and is usually treated with antibiotic eardrops. Ears need to be protected from water for two weeks after experiencing ear drainage.

Ear tubes coming out too early or staying in too long - If an ear tube expels from the ear drum too soon (which is unpredictable), fluid may return and a repeat surgery may be needed. Ear tubes usually last 6-8 months and are naturally forced out. They seldom require surgical removal. The majority of the patients only require one set of tubes to allow the child to outgrow their ear problems. However, about 25% of patients will need a repeated set of tubes.

Thank you for allowing us to care for you at the Cortland Surgical Center

if you have any questions please contact us at (607) 662 - 4521