

Ear Plastic Surgery

Ear deformities occur in a number of conditions. Some patients are born with absent (microtia), protruding or drooping ears, due to weak or poorly formed cartilage. Traumatic deformities of the ear also occur due to trauma (e.g. car wreck or dog bite) or torn earlobes. Deformity of the ears may cause social anxiety and may make children vulnerable to teasing. Regardless of the origin of the ear deformity, these ear conditions can be surgically corrected. These procedures do not alter the patient's hearing, but they may improve appearance and self-confidence.

CAN EAR DEFORMITIES BE CORRECTED?

Formation of the ear during development is a complex choreography of moving skin and adjacent soft tissue to give rise to the different parts of the ear. If this process is interrupted, various differences in ear shape can occur, with the most severe being absence of the ear (and possibly the ear canal) called microtia, to mild folding differences of the ear. The "fold" of hard, raised cartilage that gives shape to the upper portion of the ear does not form in all people. This is called "lop-ear deformity," and it is inherited. The absence of the fold can cause the ear to stick out or flop down (see below). Some infants are born without an ear canal and hearing can be restored with a bone-anchored hearing aid or it can be surgically opened, and the outer ear reshaped to look like the other ear. Those who are born without an ear (microtia), or lose an ear due to injury, can have an artificial ear surgically attached for cosmetic reasons. These are custom formed to match the patient's other ear. Alternatively, rib cartilage or a biomedical implant, in addition to the patient's own soft tissue, can be used to construct a new ear.

SURGICAL CORRECTION OF PROMINENT EARS THAT LACK FOLDS

To correct this problem, the surgeon places permanent stitches in the upper ear cartilage and ties them in a way that creates a fold and props the ear up. Scar tissue will form later, holding the fold in place. Corrective surgery, called otoplasty, should be considered on ears that stick out more than 4/5 of an inch (2 cm) from the back of the head. It can be performed at any age after the ears have reached full size, usually at five or six years of age. Having the surgery at a young age has two benefits: the cartilage is more pliable, making it easier to reshape, and the child will experience the psychological benefits of the cosmetic improvement. However, a patient may have the surgery at any age.

The surgery begins with an incision behind the ear, in the fold where the ear joins the head. The surgeon may remove skin and cartilage or trim and reshape the cartilage. In addition to correcting protrusion, ears may also be reshaped, reduced in size, or made more symmetrical. The cartilage is then secured in the new position with permanent stitches which will anchor the ear while healing occurs. Typically, otoplasty surgery takes about two hours. The soft dressings over the ears will be used for a few weeks as protection, and the patient usually experiences only mild discomfort. Headbands are sometimes recommended to hold the ears in place for a month following surgery or may be prescribed for nighttime wear only.

CAN TORN EARLOBES BE CORRECTED?

Ear lobe trauma can occur related to tearing related to injury from small children grabbing the earring or having it caught on clothing or other objects. These tears can be easily repaired

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surgically, usually in the doctor's office. In severe cases, the surgeon may cut a small triangular notch at the bottom of the lobe. A matching flap is then created from tissue on the other side of the tear, and the two wedges are fitted together and stitched. Earlobes usually heal quickly with minimal scarring. In most cases, the earlobe can be pierced again four to six weeks after surgery to receive light-weight earrings.

DOES INSURANCE PAY FOR COSMETIC EAR SURGERY?

Insurance usually does not cover surgery solely for cosmetic reasons. However, insurance may cover, in whole or in part, surgery to correct a congenital or traumatic defect. Before cosmetic ear surgery, discuss the procedure with your insurance carrier to determine what coverage, if any, you can expect.