Ears - otoplasty

Summary

- Ear correction surgery, or otoplasty, is usually done to move prominent ears closer to the head or to reduce the size of large ears.
- Similar to natural ears, the position of the ears after otoplasty will not match perfectly.
- Ear cartilage is very elastic, so there will be some forward movement of the ears after the operation.
- Talk with your surgeon about the risks and benefits of otoplasty and what results you can expect.

Surgery can also alter large or stretched earlobes or lobes with large creases and wrinkles. Surgeons can even build new ears for people who were born without them or who have lost them through injury.

Other ear problems that can be helped with surgery include:

- ‘lop ear’ – when the tip seems to fold down and forward
- ‘cupped ear’ – a very small ear
- ‘shell ear’ – when the curve in the outer rim, as well as the natural folds and creases, are missing.

Otoplasty is mostly performed on children between the ages of four and 14 years. The operation is usually done for psychological reasons on children to reduce the chance that the child may be bullied or teased. Ear surgery on adults is also possible and there are generally no additional risks associated with ear surgery on an adult.

If you are concerned about the way you or your child looks, there may be alternatives to surgery. Discuss possible options with your doctor.

Things to consider before otoplasty surgery

Before you opt for otoplasty, some important issues to keep in mind include:

- Even when only one ear appears to stick out (protrude), surgery is usually performed on both ears for a better balance.
- Exact evenness (symmetry) isn’t likely. Similar to natural ears, the position of the ears after otoplasty will not match perfectly.
- Think about the financial cost. Medicare and private health insurance may cover a few costs, but you must be prepared for some out-of-pocket expenses. Ask your surgeon for further details.
- Smokers are at increased risk of complications. If you are serious about undergoing surgery, you should try to quit smoking.

Finding an otoplasty surgeon

You may want to ask your doctor for advice on a suitable and reputable surgeon or hospital where otoplasty is performed. At your first consultation, you should ask the surgeon about their training and experience. It is preferable to have this procedure done by a surgeon who is specially trained to perform otoplasty and has a lot of experience in carrying out this type of surgery.

Medical issues of otoplasty

Before the operation, you need to discuss a range of medical issues with your surgeon including:

- Physical health – an examination will help your doctor or surgeon to decide if the treatment is appropriate.
- Mental health – let your surgeon know about any pre-existing mental health issues both related and unrelated
The otoplasty operation
Otoplasty surgery takes around one to three hours, depending on the complexity. You may have a local anaesthetic and sedation, but some people prefer a general anaesthetic. Usually, children are given a general anaesthetic.

Generally speaking, otoplasty involves several steps including:

- The fold of skin behind the ear is cut to expose the underlying cartilage.
- The surgeon removes the excess cartilage. In some cases, the cartilage is remodelled. For example, the surgeon may reshape the cartilage by folding it back and stitching it in place.
- Incisions (cuts) are closed with stitches.

Immediately after the otoplasty operation
After the operation, you may expect:

- nausea
- mild pain or discomfort
- dressings and bandages
- swelling and bruising
- numbness.

Complications of otoplasty
All surgery carries some degree of risk. Some of the possible complications of otoplasty include:

- risks of anaesthesia including allergic reaction, which may (rarely) be fatal
- surgical risks such as bleeding
- blood clots that may cause potentially fatal cardiovascular complications such as heart attack, deep vein thrombosis or stroke
- temporary or permanent areas of numbness
- infection in the cartilage, which can cause scar tissue to form
- inflamed, itchy scars
- asymmetry (unevenness) of the ears
- ‘cauliflower’ ears (haematoma auris), fibrous overgrowths that permanently deform the ears
- skin death (necrosis) along the wound
- further surgery to treat complications.

This is not a complete list. For example, your medical history or lifestyle may put you at increased risk of certain complications. You need to speak to your surgeon for more information.

Self-care after otoplasty
Be guided by your surgeon, but general self-care suggestions include:
Follow all instructions on looking after your wounds.
You will have to wear tight bandages for one or two weeks. This includes wearing the recommended dressings at night.
You are likely to experience soreness and swelling for a few weeks.
Avoid any trauma to the ears – for example, do not play any contact sports until your surgeon says that it is okay.
Report any bleeding, severe pain or unusual symptoms to your surgeon.

Long-term outlook following otoplasty
Over time, any swelling will disappear. In most cases, ear surgery will leave a faint scar on the back of the ear that will fade over 18 months or so. Once you’ve had ear surgery, the results are permanent. However, ear cartilage is very elastic, so there is always some forward movement of the ears after the operation.

Alternatives to otoplasty
There are no medical treatment alternatives to otoplasty that can reposition or reshape the ears. You may be thinking about this surgery to boost your child’s or your own confidence. There may be other ways to achieve this. Talking to a counsellor or psychologist may be helpful to overcome your child’s or your own concerns about how you look.

Where to get help
- Your GP (doctor)
- Plastic surgeon
- Australian Society of Plastic Surgeons Information Hotline Tel. 1300 367 446
- Royal Australasian College of Surgeons Tel. (03) 9249 1200
- Australian Health Practitioner Regulation Agency Tel. 1300 419 495