

Patient information

Major Ear Procedures

Martin Corke Day Surgery Unit

Cholesteatoma

A cholesteatoma is a cyst or sac of skin that is growing backwards behind the eardrum into the middle ear and mastoid bone. The longer it remains the more damage it can do to the delicate structures of the ear. If left untreated, it can destroy hearing and the balance organ, and can damage the facial nerve which can cause paralysis to that side of the face. Removing it should remove the risk of these complications. It may also be possible to improve the hearing in that ear. There are multiple versions of the mastoid operation, and your surgeon will discuss with you the one that is most appropriate for you.

Myringoplasty / Tympanoplasty

A myringoplasty is an operation performed to repair a perforation of the eardrum. Closing the perforation should result in fewer ear infections, improved hearing, and allow you to get your ear wet.

There are several versions of this operation, and the surgeon will discuss with you the one that is most appropriate to you.

Following your surgery

You may experience some mild to moderate pain, which can be relieved by taking painkillers, and on discharge you will be given 3 - 5 days' supply to take home. Paracetamol or similar medication is appropriate should you experience further pain when your initial supply of tablets is finished.

Dressing instructions

The bandages or outer dressing can be removed the day after your surgery. You will have some small dressings inside your ear canal. If they become dislodged do not try to push or pull them. Instead use some clean scissors and cut off the end of the dressing where it protrudes from the ear canal. These dressings will be removed by the doctor when you attend the ENT outpatient clinic approximately 1 to 2 weeks following your surgery.

If you need to have any stitches removed this will be done at this appointment.

If you also have a piece of cotton wool just inside your ear, this will need to be replaced with clean cotton wool once or twice a day for the first two days following surgery. Any oozing from your ear after this can gently be wiped away with cotton wool.

You can wash your hair after one week provided that you are careful not to get water into the operated ear.

Sneeze with your mouth open to minimise the pressure on your ears.

You may return to work after two weeks.

Do NOT swim or dive until after you have been seen in the outpatient's department.

Do NOT fly in an aeroplane for 6 weeks.

Do NOT blow your nose violently. Gently clear one nostril and then the other.

Outpatients appointment
This will be sent to you.

If your ear becomes painful, swollen or is bleeding, please contact the Martin Corke Day Surgery on 01284 713050 between 7.45am and 8.00pm, Monday to Friday.

Outside these hours contact the ENT ward on 01284 713290 and speak to the nurse in charge. Please have your hospital number on the discharge letter available.

Or your GP / GP out-of-hours service.

Or

NHS 111.

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (formerly DisabledGo)
<https://www.accessable.co.uk>



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