

Patient information

Protruding ears / bat ears / pinnaplasty

Disclaimer: The details in this section are for general information only. Always check with your own surgeon.

What is this?

Protruding ears in children can often lead to a child being teased at school. It is due to a defect in part of the cartilage (gristle) of the ear, and one or both ears can be affected.

Why have an operation?

To correct the shape of the ears so that they protrude less, and to help the child become less self-conscious.

What does the operation involve?

Surgical correction can be carried out whenever the patient wishes, but not usually before the age of about six, because by this stage the cartilage in the ear is more mature.

The operation involves a general anaesthetic. While the child is asleep the cartilage is exposed from behind the ear and the deficient fold in the cartilage is reconstructed. Often dissolvable stitches are used to close the skin, but this varies from surgeon to surgeon. A head bandage is left in place for two weeks to help the ears heal in their new position.

What happens after the operation?

If the child is well he / she may leave hospital the same or the next day. The head

bandage will be removed after two weeks, but a lighter dressing may be recommended to wear at night for a further six weeks after that.

When can I wash my hair / swim / fly?

You can usually wash your hair after two weeks. Before that the incision will not have fully healed, so if you do wash your hair, use a shower attachment and keep the area around the ear as dry as possible.

It is best to wait six weeks before swimming, to ensure that everything has healed properly.

You can fly at any time after the operation.

What are the risks of the operation?

There is a small risk of an infection after the operation. There is also a risk that the correction of the bat ear does not last very long, and the ear 'springs back' into its original position – again this is not common.

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