

Risks of the Operation

While all operations have risks of side effects, the incidence of side effects following tympanoplasty is low.

Infection

Rarely infection may develop in the wound. If so, you may notice increased pain with/without discharge. This will settle with antibiotics.

Hearing loss

Rarely (less than 2%) of patients may experience a decrease in their hearing after the operation.

Failure of the graft

In the unfortunate event of an infection, the graft may fail to heal and the ear may have a residual perforation.

This information leaflet is only a guide to tympanoplasty surgery and does not replace a full and detailed discussion with your surgeon regarding your condition, the benefits and risks of the operation and alternative treatment available.

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Our Services

Adventis ENT Services is dedicated to providing excellence in standards of care to children and adults for all conditions of Ear, Nose & Sinus, Throat & Voice, Head & Neck, Hearing & Speech disorders

The team of Adventis ENT Services is led by Dr Ameet Kishore FRCS(UK), an ENT, Cochlear Implant & Neuro-otologic Surgeon with over 25 years of experience. He has brought together International Experience and Advanced Technology to offer the highest level of patient care and excellence in medical treatment

- Endoscopic & microscopic examination of ear, nose and throat
- Microscopic surgery for ear, hearing restoration & neuro-otology
- Cochlear Implant and Implantable Hearing device programme
- Endoscopic surgery of nose, sinus & skull base
- Paediatric ear, nose, throat and airway surgery
- Head-neck, salivary & thyroid gland surgery
- Snoring, sleep apnoea, robotics, lasers and radiofrequency
- Comprehensive hearing testing facility for children and adults*
- Provision for fitting of hearing aids and for Hearing - Speech therapy*

We want you to feel confident that you are working with doctors and professionals who are qualified, experienced and caring to provide you personalised and professional care to improve your quality of life.

ENT & Cochlear Implant Clinics

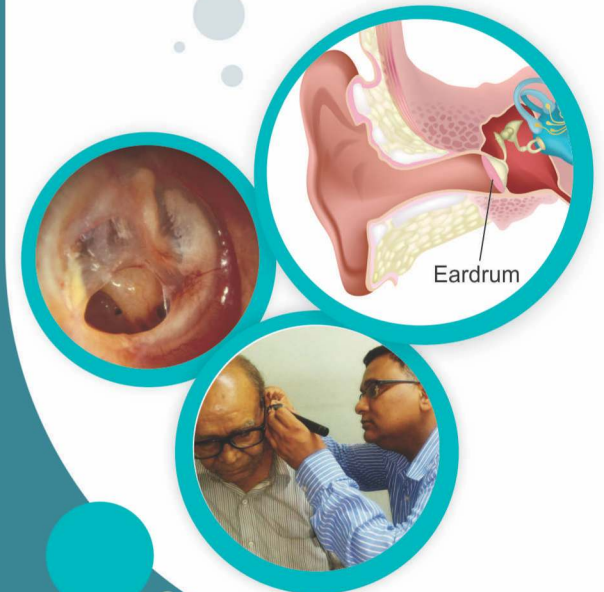
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TYMPANOPLASTY

(Includes MYRINGOPLASTY)

What is a Tympanoplasty ?

Tympanoplasty is an operation that is aimed to remove infection from your ear, close a hole in your eardrum and if necessary repair the hearing bones in your ear. The exact procedure you will undergo depends on the problems you have with your ear and the result of the examination and any investigations.

Before the Operation

Before the operation you would have had a consultation with your Ear, Nose and Throat surgeon. You would have discussed the various problems you have with your ear, particularly in terms of discharge and hearing. It is during this consultation that your ears would be examined and you would have a hearing test.

Your surgeon would have discussed the findings of the examination and hearing test and their relevance to the problems you have with your ear or hearing.

Based on this, he would have discussed various options to you to help deal with your ear problem. This could include the use of antibiotic eardrops and/or the fitting of a hearing aid.

If you have decided to have an operation, he would have discussed the likely outcomes following the operation. For example, if you have a hole in the eardrum, the chances that this will be closed following the operation. Any discharge from your ear due to this hole will naturally stop once the hole is closed. Any improvement in hearing is however variable and depends on the exact condition of your ear and the hearing bones and thus varies from one individual to another. This will be discussed with you in detail.

Tympanoplasty



The Operation

You are usually admitted on the day of the operation and can expect to be discharged within 24-36 hours. The ear operation could be performed under local anaesthetic or general anaesthetic and this would have been discussed with you at consultation.

The operation involves making a cut either just in front or just behind the ear to allow the surgeon to lift the eardrum and expose the middle ear. Any hole in the eardrum is repaired with a graft of either fascia (the lining of a muscle beside your ear) or cartilage. If the bones of hearing have to be repaired, this may be done at the same time using either your own bone or a synthetic artificial bone. At the end of the operation the wound is closed with stitches and a pack (dressing) is inserted into the ear canal. The stitches and pack are usually removed 2 weeks after the operation.

After the Operation

- Your ear may be painful, tender and numb for the first few weeks. Painkillers may be taken as prescribed.
- It is common for your ear to feel quite blocked due to the presence of a pack as well as blood and dissolvable sponge in your ear. The pack and stitches will be removed one to two weeks after the operation.
- You will be asked to use eardrops for a period after the operation. Initially you are advised to instil the drops over the pack. Once the pack is removed, you would continue to use the drops till instructed.
- You will also hear crackling and noises in your ear. Sometimes the ear will itch and you are advised not to scratch.
- The blood and dissolvable sponge in your ear takes longer to disappear and it may be up to 3 months before you notice a hearing improvement.
- Occasionally there may be slight bloodstained discharge from the ear / wound for the first few days. You may use a ball of cotton wool in your ear to soak this.

- You may experience slight dizziness or noises for some time after the operation. Occasionally some may notice a change in taste sensation, as the taste nerve runs under the ear drum and can be stretched during the operation.
- You could use cotton wool and Vaseline to protect your ear and wound while you wash your hair in the first few weeks after the operation.
- Avoid blowing your nose or sniffing for 4 weeks after surgery. If sneezing occurs do so with the mouth open to avoid the build up of pressure in the ear. Exercising, heavy lifting (that requires any degree of straining), and air travel should be avoided for 4 weeks after surgery.

Avoid the Following During the 2 Weeks After Your Surgery

- Do not engage in any strenuous activity, heavy lifting, or bending over.
- Do not blow your nose vigorously for 1 week. You may lightly blow your nose during the 2nd postoperative week. Occasionally you may be given instructions not to blow your nose for longer periods of time.
- Do not resist the urge to sneeze or cough. Instead, sneeze or cough with your mouth open.
- Do not take any supplements or herbal remedies that may increase your risk of bleeding (Vitamin E, Garlic, Ginkgo, Ginger, etc.)
- Limit alcoholic beverages. Alcohol is dehydrating, increases your risk of bleeding, and should not be mixed with your pain medication.
- Avoid cigarette smoking. If you smoke, please do your best to quit or at least significantly limit your cigarette usage. Tobacco smoke is known to adversely affect post-operative healing and increase the risk of anaesthesia.

