CORRECTION OF PROMINENT (BAT OR CUP) EARD

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Information delivered to :

Doctor :

Patient's name :

Date :

This document has been created under the authority of the **French Society of Plastic Reconstructive and Aesthetic surgery** (*Société Française de Chirurgie Plastique Reconstructrice et Esthétique - SOFCPRE*) to complete the information that you received in your first consultation with your Plastic Surgeon. It aims to answer all the questions that you might ask, if you decide to undertake an otoplasty.

The aim of this document is to give you all the essential information you need in order to make an informed decision, with full knowledge of the facts related to this procedure. Consequently, we strongly advise you to read it carefully.

● *DEFINITION, AIMS AND PRINCIPLES*

The correction of prominent ears requires a surgical procedure called "otoplasty", the aim of which is to reshape the ears, that are too visible (bat ears) or formed with no cartilage folds (cup ears).

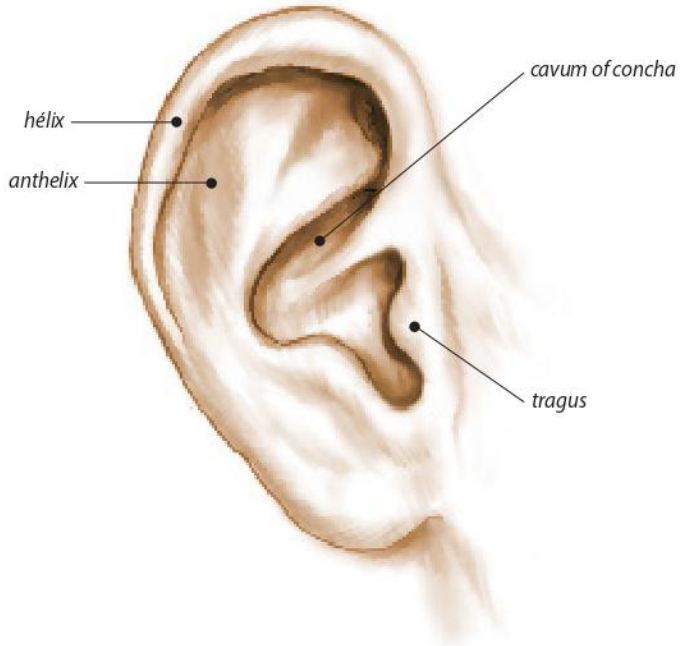
The surgery is usually performed on both ears but can be done unilaterally.

An otoplasty aims to corrects the auricle's cartilaginous abnormalities which are the cause of the prominent aspect. Schematically, there exist three main types of abnormalities which are often, more or less, associated :

- **Too wide an angle** between the auricle and the skull, causing the so called «bat ears» (valgus helix).
- **Too large size of the conchal cartilage** (see diagram) pushing forward the ear which increases the prominent aspect (concha hypertrophy).
- **Failure to develop the normal cartilage reliefs** folds which gives a too smooth, "unplaited", aspect to the ear (lack of anthelix plicature).(cup ears)

Surgery aims to, permanently, correct these abnormalities, by reshaping the ear cartilage, in order to obtain well-positionned, symetrical ears that are natural in size and aspect. Correcting prominent ears will stop teasing and other unpleasant remarcks which may have induced psychological difficulties or problems at school.

An otoplasty can be performed in an adult, in a teenager, however it is performed in general aroud 6-7 years old or as soon as the child is worried by the shape of their ears.



● *BEFORE THE OPERATION*

Otoplasty might be partly reimbursed by French health insurance or your personnel medical cover.

The surgeon will carry out a meticulous clinical examination and a photographic study of the ears to determine the needed modifications.

An anaesthetist must be seen in consultation, at least 48 jours before surgery, in case of general anaesthetic or «vigil» one.

A standard pre-opérative evaluation is done, following the prescriptions of the anaesthetist.

Depending on the type of anaesthesia fasting (no food, no beverage) for 6 hours before surgery may be necessary.

No medicine containing aspirin should be taken for at least 10 days before surgery.

It is advisable to have short hair or if the hair si long a pony tail is suitable. Hair must be washed the day before surgery.

HOSPITAL STAY AND TYPE OF ANAESTHESIA

anaesthesia :

Three types of anesthesia are possible.

- simple local anaesthesia (a local anesthetic is injected to numb the ears)
- local anaesthesia completed by tranquillizing drugs, injected into the vein («twilight» anaesthesia)
- classical general anaesthesia, which puts you completely to sleep

The choice between these different techniques will be made after you have discussed it with the surgeon and the anaesthesiologist.

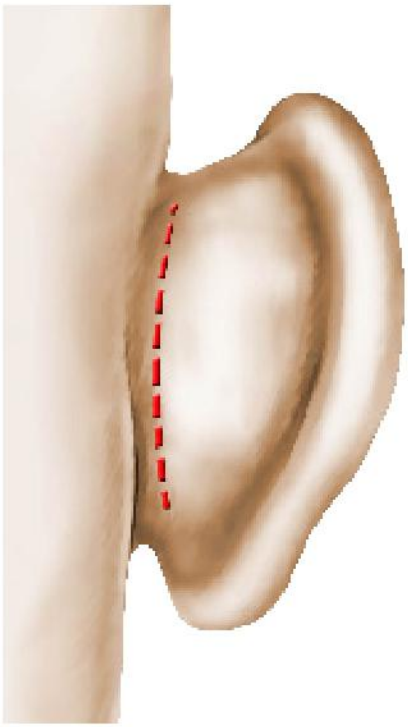
Hospital stay :

The surgery can be done in the "day care" department; it means, you can leave hospital the same day of the surgery, just after a few hours of resting and medical supervision.

However for certain patients an overnight stay if preferable; it means, you enter the hospital early morning, the day of surgery (or sometimes the day before in the afternoon) and leave it the day after surgery.

THE PROCEDURE

Each surgeon is uses his own technique, which he will change to suit each case, in order to get the best result.



However there certain basic principals :

Skin incisions :

Usually, there are inside the natural retro-auricular fold that is behind the ear. Sometimes, some small complementary incisions are necessary in the front side of the auricles, they will be hidden inside natural folds.

It is never necessary to cut the hair during surgery

Dissection :

The skin will be then undermined as far as needed to allow the cartilage to be reached.

Cartilage reshaping:

The principle of this surgery is to create or improve the natural reliefs of the auricles by thinning and/or bending the cartilage framework, which may necessitate deep fine stiches. Sometimes, cartilage cutting or partial removing is indicated. Finally, the auricles are placed in a normal position, in relation to the skull, and anchored by deep stiches.

Sutures :

Usually, the skin is closed using absorbable stiches; if not, the stiches removed about 10 days after surgery.

Dressing :

Will be done with elastic bandages around the head to keep the ears in a good position.

Depending on the surgeon and on the gravity of abnormalities to be corrected, the surgery may take between half an hour and one and half hours, to correct both ears.

THE SURGICAL FOLLOW-UP

Pain is usually minor and if necessary, can be treated using pain killers and anti-inflammatory drugs.

However, in case of persistent or severe pain, you must consult the surgeon or someone of his team.

The first large dressing is removed 2 to 5 days following surgery. It will be replaced by a lighter one for another few days.

For the first few days the ears may be ecchymosed (bruised) and swollen thus hiding the ear. This is quite usual and should not worry you; it will be transitory and does not affect the final result.

A maintaining and protecting head-band will be used day and nights for 15 days and then for a further few weeks, night, only. During this time, avoid any sports, or physical activity

Especially if there is a risk of contact that could bend back the ears

You must also avoid extreme cold temperatures for at least 2 months after surgery, as the ears are temporally less sensitive there is a risk of frost bite.

THE RESULT

The final results will be visible 1 to 2 months after surgery. This is the time needed for the oedema to disappear, allowing the ear folds to be clearly seen. After this delay the scar will be pink and hard for another few months before gradually fading.

This surgical procedure will in most cases, correct anomalies in shape & position of the ears, so that they have a natural position & appearance

In a large majority of patients, the result is permanent. But sometimes, a slight (as a rule) recurrence of the prominent aspect of the ear may occur and indicate a minor secondary surgical correction.

To summarize, this surgery generally allows to efficiently correct unaesthetic prominent ears, putting an end to teasing and other unpleasant remark which often lead to psychological difficulties or problems at school

The aim of this surgery not to obtain perfection but is to obtain an improved & naturel result if the wishes of the patient are realistic then the results of surgery will deeply satisfying.

● *IMPERFECT RESULTS*

They can appear after a while, due to unexpected tissue retraction or unusual scarring process.

So, we may, sometimes notice slight asymmetry between the two ears, small irregularities of the ear reliefs, too acute cartilage folding, narrowing of the ear hole or being able to feel the deep sutures below the skin

All these so called "small imperfections" are not visually evident and not seen by others. If necessary, they can be corrected and the result can be refined under local anaesthesia.

● *POSSIBLE COMPLICATIONS*

Even if it is done for aesthetic reasons, an otoplasty remains a true surgical procedure, what means, it can induce the same risks as any surgery however minor.

We must differentiate the complications of anaesthesia from those due to surgery.

- Concerning anaesthesia, it's the anaesthesiologist, himself, who will inform the patient of specific risks. During the pre-operative consultation, one should realise that anaesthesia can very rarely cause unpredictable reactions, which are more or less easy to control: a competent anaesthesiologist, working in a surgical environment statistically reduces the risks to an almost insignificant level.

- Technics of anaesthesia. The drugs used & the methods of surveillance of the patient during and after anaesthesia have made enormous progress during the last 20 years this provides the patient with optimal security, especially since the surgery in none urgent and the patient is known to be healthy.

- Concerning surgery, by choosing a qualified competent plastic surgeon, trained for this type of surgery, you limit as much as possible these risks however without totally eliminating them.

- While serious complications after an otoplasty correctly performed are extremely rare they can still occur and you should be made aware of them.

- The post-operative bleeding :

- if it is more than just a blood stain on the dressing (should not make you anxious) further surgery may be necessary to stop the bleeding. If bleeding does not leek out it may cause a swelling, (haematoma)which may need to be emptied to protect the quality of the aesthetic result

- infection is fortunately rare thanks to the rigorous operative asepsis. But if an infection occurs, it needs speedy and radical treatment to avoid it reaching the cartilage (chondritis) which can have severe consequences.

- Skin necrosis can exceptionally be seen. It is usually limited and localized at the anterior side of ear relief where the skin is very thin and the blood supply disturbed. It usually heals with local dressings and a small discrete scar may remain.

- Abnormal scars : in spite of all, the care of the suturing, an ear scar, of any kind, can become hypertrophic or develop into "a cheloid scar" the evolution of which is unpredictable and the treatment of which remains difficult. A preventive treatment may be prescribed (silicone gel or compressive dressing)

In Summary, the risks must not be overestimated, but you must be conscious that an operation, even a minor one, always has some degree of unforeseeable unknown factors.

You can be assured that if you are operated on by a qualified Plastic Surgeon, he will have the experience and skill required to avoid these complications, or to treat them successfully if necessary.

These are the facts which we wish to bring to your attention, added to those that were given during the consultation.

Our advice is for you to keep this document and to read it and think it over carefully in peace after your consultation.

Once you have done this you will perhaps have further queries, or require additional information.

We are at your disposal should you wish to ask questions during your next consultation, or by telephone, or on the day of the operation, when we will meet in any case, before the anaesthesia.

PERSONNAL OBSERVATIONS :