



MYRINGOPLASTY

Eardrum holes (perforations) can occur due to several different reasons. A common one is a persistent perforation after a tube has been removed. It can also occur due to trauma (head injury, placing something into the ear, etc.). Sometimes infections of the middle ear result in eardrum perforations as well.

A perforation is patched in one of two ways, either by a myringoplasty or tympanoplasty. Myringoplasty is a simpler way to attempt patching the eardrum. The hole is essentially plugged with a type of material (either gelfoam or fat) in order to stimulate the healing of the eardrum. A tympanoplasty is a bigger procedure that typically involves lifting the eardrum up and patching from underneath. Sometimes a simpler myringoplasty may not heal the perforation, and a bigger surgery may be needed later.

Surgery is typically less than 30 minutes and requires general anesthesia. This is typically done with just gas anesthesia through a mask.

The recovery from a myringoplasty is typically well tolerated. Most people have minimal pain. You may see some drainage from the ear the week after surgery. Eardrops may or may not be needed.

- No swimming until the first post-op visit
- Keep the ear dry when bathing (use a Vaseline-coated cotton ball to help keep water out)
- Can usually return to work or school within a few days
- No heavy exercise or lifting until seen at the first post-op visit
- Motrin or Tylenol for pain

If fat was needed for the repair, there will be a few dissolvable stitches on the earlobe. These will dissolve in 5 to 7 days. Try to keep them dry during that time.

The ear will be checked one month after surgery. If the perforation has already healed, then we will perform a hearing test that day. If it is not quite healed yet, we will give it 3 months before rechecking the hearing.

Please contact our office at 478-743-8953 if you have any questions or concerns.