

Prominent Ears

This leaflet provides information to parents of children referred with prominent ears. It explains what prominent ears are, how they can be corrected and what to expect during and following surgery.

If you have any further questions, please speak to a doctor or nurse caring for your child.

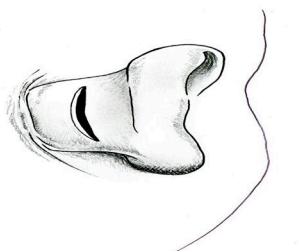
What are prominent ears?

Ears naturally stand away from the side of the head but in some cases they stick out more noticeably and in childhood can draw unwanted attention and be a focus for name calling and bullying.

Prominent ears are not linked to any medical condition but can sometimes run in families. Having prominent ears does not impact on your child's hearing.

What is a pinnaplasty?

Pinnaplasty is the medical term for an operation that can be done to correct prominent ears. Your child will have their operation carried out under general anaesthetic. An incision (cut) will be made behind their ear and the skin and cartilage is then reshaped so the ears lie back closer to the head in a more natural position.



The incision made during the operation behind the ear



New position of the ear closer to the head

What will happen at my child's outpatient appointment?

The doctor will explain the procedure to you and your child. You will have the opportunity to ask questions about the procedure and follow up.

The doctor will also ask for your child to have photos which will go into your child's notes so that they can see the before and after comparison.

Your child will be added to the waiting list for their operation and you will be contacted by the admissions pathway coordinator to arrange a date.

What will happen on the day of admission?

A pinnaplasty is carried out as a day case procedure, so you will be able to take your child home later the same day.

Your child will be admitted to one of the children's wards where the paediatric nurses will help to prepare them for their operation and general anaesthetic.

You will have an opportunity to speak with the anaesthetist on the day of the surgery, to ask questions or raise any concerns you have about the general anaesthetic.

While your child is asleep local anaesthetic will be injected around the ears so that when they wake up they should be pain free. This usually lasts for a few hours. It is important your child has some oral pain relief before the local anaesthetic wears off.

At the end of the operation, your child's wounds and ears will be protected by surgical glue and a Tubigrip headband. The Tubigrip headband should only be worn overnight and must be removed during the day and for showering. The Tubigrip headband can be swapped for a sports sweat band if your child finds this more comfortable. The headband should be tight enough to ensure the ears stay in the correct position but not too tight to put pressure on the skin or cause pain/discomfort.

When the ward nurses are happy your child has recovered from their anaesthetic and they have met the discharge criteria they will be allowed home.

Asking for your consent

It is important that you feel involved in decisions about your child's care. Before the operation, you will be asked to sign a consent form to say that you agree to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously.

If you would like more details about our consent process, please ask for a copy of our policy.

What are the risks?

All operations carry a small risk of infection and adverse reaction to the anaesthetic. To help reduce the risk of infection, a single dose of antibiotics will be given at the time of your child's operation.

After the operation, it is quite normal for the ears to look bruised and swollen. It can take a few weeks for this to settle and subside, so the result of the operation should not be judged until then. If the bruising and swelling appears to be increasing once your child has been discharged, then it is important you attend St Georges Hospital for review. You should bring your child to the Emergency Department for review by the plastic surgery team.

Occasionally, the ear (usually just one) can return to its original prominent position. Your child may require a second operation at a later stage to correct this. Ears are unique and they may be asymmetrical before surgery and afterwards. This is normal.

The scar that forms behind the ear may appear red and lumpy at first and can take a little time to settle and flatten. Rarely, this scar may stay red and slightly raised (a hypertrophic scar) or it may

thicken and get lumpy (a keloid scar). If this happens it is important for your child to be referred back to the plastic surgery team so that they can advise you on how to manage it.

Will my child have any pain?

The local anaesthetic that has been injected into the area will keep your child comfortable for the first few hours after their operation. It is important that your child has some oral pain relief before the local anaesthetic wears off completely.

It is recommended that you give your child regular painkillers such as paracetamol and ibuprofen for two to three days after the surgery. If you require further advice, please speak to your doctor / GP or call the **Medicines Information Patient Helpline on 020 8725 1033**.

What do we need to do when we go home?

If your child has any bleeding or an increase in pain, please contact the plastic surgery team. This can be done via the ward from which you were discharged.

It is important for your child to wash their hair from the day after the operation but they should take care not to rub the ears vigorously during washing or drying the hair. It is important to make sure the area behind the ears is completely dry. This can be done by gently aiming a hairdryer on a cool setting behind the ears.

Will there be a follow up appointment?

Dressing clinic review

At this review you will be seen by the nurse who will check how the ears and wounds are healing. It is important that they protect the new position of the ears at night for six weeks following surgery. This is done by wearing a Tubigrip headband or a soft towelling sports headband at night time.

Until your child is seen by the consultant following their operation, they need to take great care to protect their ears.

During this time:

- They should not go swimming
- They should not take part in any sports and avoid situations where their ears may get knocked or pulled
- They should not expose their ears to direct sunlight and should wear a hat in the sun.

Follow up with the surgeon

As well as the one week follow up, your child will also be seen by the surgeon in the outpatients department approximately six weeks after the operation.

Useful sources of information

The British Association of Aesthetic Plastic Surgeons

https://baaps.org.uk/patients/procedures/14/setting_back_prominent_ears

British Association of Plastic Reconstruction and Aesthetic Surgeons

www.bapras.org.uk/public/patient-information/surgery-guides/ear-surgery/prominent-ears

Contact us

If you have any questions about your child's operation, wound or dressing, please contact the ward from which they were discharged:

Nicholls ward on 020 8725 3389 or 020 8725 2098

Freddie Hewitt ward on 020 8725 2074

Pinckney ward on 020 8725 2082

Jungle ward (7.30am to 8pm) on 020 8725 2034.

You can also contact the paediatric plastic surgery clinical nurse specialist on 020 8725 2656 and leave a message on the answerphone. If your query / concern is urgent please don't leave a message but contact the ward from which your child was discharged.

For follow up appointments please contact the outpatient's booking department on 020 8725 0007 or www.stgeorges.nhs.uk/patients-and-visitors/visiting/change-your-appointment

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm
Friday between 10am and 2pm.

Please contact PALS in advance to check if there are any changes to opening times.

The Walk-in and Advisory telephone services are closed on Wednesdays.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough Wing.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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