



MAO FACIAL PLASTIC SURGERY

/// JOHNNY MAO, MD, FACS

Otoplasty

Otoplasty is a very common procedure to correct protruding ears in both children and adults. There are numerous factors contributing to malformed or protruding ears. Your surgeon will discuss the causes individually with you. If surgical correction is desired, your surgeon will discuss the plan with you, and expectations for the results. For children, we usually recommend the procedure to be performed around age five. At this time, the ears have almost grown to adult size, and are fully developed. The cartilage is still more pliable than an adult, though, facilitating accurate sculpting. In addition, surgery at a young age allows us to correct the appearance of the ears before the child goes to school where he/she may be self-conscious. An otoplasty can help change you or your child's self-image.

What You Should Know:

During development, both ears develop separately, allowing for differences between the two ears. There are many alterations that can occur during the developmental process, resulting in different appearances. Some ears protrude too much from the head, some have floppy cartilages or are lacking the usual folds in the cartilage, which are necessary to maintain the normal shape of an ear. Otoplasty is a term referring to reshaping and refining the external appearance of the ear to make the ears symmetric, and in balance with the rest of your facial features. Otoplasty will not change your hearing ability.

When you see your surgeon, he/she will examine both ears carefully for symmetry, any cartilage irregularities, missing cartilage folds, or excess cartilage. We will then discuss with you the best approach for correcting the problem. Each patient has specific needs, which should be addressed through an individualized surgical plan. Usually, both ears are operated on at the same time. Even if only one ear needs "pinning back", both ears are usually operated on in order to achieve better symmetry.

Understanding the Surgery:

All pediatric patients and some adult patients will require a general anesthesia for this surgery. Local anesthesia is an option for certain patients. Surgery typically involves an incision behind the ear, in the area of the natural fold where the ear joins the head. This allows for a well hidden incision. Depending on what the surgical plan involves, your surgeon will manipulate the ear cartilage into the correct shape, taking care to compare both sides for symmetry. However, no two ears are exactly the same before surgery, and they will likely not be exactly the same after surgery. It is important to understand this.

Before Surgery

1. Only take Extra Strength Tylenol• for aches and pains, starting at least three weeks before surgery. It is very important NOT to use any aspirin, aspirin.. containing compounds or non-steroidal anti-inflammatories (i.e. ibuprofen, Motrin, Advil, Aleve, Celebrex, etc). These all work by thinning your blood and can cause increased bleeding during surgery and increased bruising after surgery. Children should take only Children's Tylenol as directed for any fevers or, aches before surgery.
2. Do not take vitamin E supplements, fish oils, omega-3 supplements, or herbal supplements such as garlic, ginkgo, or ginseng for at least three weeks prior to surgery. These supplements may also increase the likelihood of bleeding and bruising. A prepackaged multivitamin product (such as One-A-Day or Centrum") is fine, but do not add any of the above supplements.
3. If you are on a blood thinner like Coumadin" {warfarin) you must let your surgeon know, and he/she will have you speak to your primary care doctor about managing this prior to your surgery.
4. Avoid alcoholic beverages the night before surgery.



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5. You will be taking antibiotics and pain medicine after your surgery. It is helpful to have picked these up from the pharmacy prior to the day of surgery, so you won't have to be bothered with it that day. The surgeon will write both prescriptions for you, or they will be called into your pharmacy by the office. You should also purchase a tube of ointment (Aquaphor) which you will use over your stitches after the surgery.
6. You will always have at least two postoperative appointments - these will be set up ahead of time. Usually, you will be seen the 1-3 days after and 1-2 week after surgery.
7. You will need to buy a sweatband or headband to wear over your ears, after surgery. This can be any commercial type of sweatband made of terry cloth, or even a winter headband/ear warmer made of fleece.

What to Expect After Surgery:

Most patients will go home the same day, unless the procedure is performed at the same time as another procedure requiring a hospital stay. At the end of the surgery, you (or your child) will have a tight headwrap on in order to protect the newly sculpted ears. It is important to keep this on for the first night. That first night, there will be some discomfort. Your surgeon will prescribe pain medicine and an antibiotic to take for one week after the surgery. You will see your doctor the day after surgery for a quick examination. At this visit, the bandage will be removed, once this headwrap is removed, it is okay to shower. Just let the soap and water run over the area, do NOT do any vigorous scrubbing or rubbing over the ears. Pat the area dry with a towel then apply ointment directly over the stitches behind the ear. For the first week you will be instructed to wear a headband or sweatband covering both ears, and holding both ears close to the head. This is required to be worn all day, every day for the first week after surgery. Any manipulation of the ears during the first week could disrupt the sutures and alter the outcome. The headband can be taken off for showering, and to apply the ointment over the stitches twice a day. If everything is healing well, the headband only needs to be worn at night during the second week to make sure that the ears aren't inadvertently traumatized during sleep. The stitches are dissolvable and do not need to be removed. They will start to dissolve toward the end of the first postoperative week. If you notice some of the stitches coming out while you are applying your ointment, do not be alarmed - this is normal. You will see your surgeon again one week after the surgery, and then intermittently over the next several months to make sure everything is healing as expected.