Correction of prominent ears

**What is prominent ear correction?**
Prominent ear correction, pinnaplasty (or pinning back of the ears as it is commonly referred to by patients), is performed for children and adults who feel that their ears are too prominent and point outwards. Children usually become aware of the problem because they are bullied or teased at school by their friends.

**At what age are prominent ear corrected?**
For children, this is usually when they become self-conscious of their appearance, mostly stemming from comments by others. This age is variable for every child but generally begins from the age of 5-7 years. It is important for the child to feel there is a problem and to want the operation. They will then appreciate and cooperate better with what the operation and aftercare involve. Adults can have ear correction at any age.

**How is it performed?**
I usually use general anaesthesia for both children and adults. Adults however can quite acceptably opt for a local anaesthetic. It takes about 1-1 1/2 hours.
A small piece of skin is removed from the back of the ear. The cartilage is exposed, and permanent sutures are used to mould the cartilage. The skin is closed with dissolving sutures. A special protective head dressing may be used initially especially in children.

**What is the post-operative care?**
You should be able to go home the same day. I usually keep the head dressing for seven to ten days in children. In adults, it can be removed after a few days. If the dressing slips, do not panic, it would just need to be redone.
When the head dressing is removed, you will need to use a headband to protect your ears for 6-12 weeks especially during sleep and contact sport.
Children will probably need a week off school. Time off work will depend on what you do and may vary from a few days to a couple of weeks.

**What are the risks of this operation?**
Haematoma (blood collection), requiring evacuation in theatre occurs in less than 3% of people.
The scars in a few individuals can become raised and lumpy and may require further treatment. Occasionally the sutures may spit out and require trimming.
Recurrence, usually of one ear though uncommon can occur. Further surgery can be done to correct this. Infection and wound breakdown, which are fortunately rare.

**Did you know!**
This is a very common form of aesthetic surgery. The results are usually excellent and lasting, giving patients a natural appearance and a massive dose of confidence. Minor degrees of asymmetry may remain, as no two ears are same.

These notes are intended to be used with your consultation

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