



## Operation Information

### Myringotomy ± Ventilation Tube Insertion

#### Introduction

A small incision is made in the eardrum which is a thin tissue layer separating the external and middle ear (myringotomy). Then, a small ventilation tube is placed through the eardrum.

#### Indications

1. Recurrent otitis media with effusion
2. Acute otitis media that do not go away with medication treatment
3. Eustachian tube dysfunction

#### Outcomes

The operation helps to reduce recurrent ear infections and restore hearing loss which is caused by chronic fluid accumulate of otitis media.

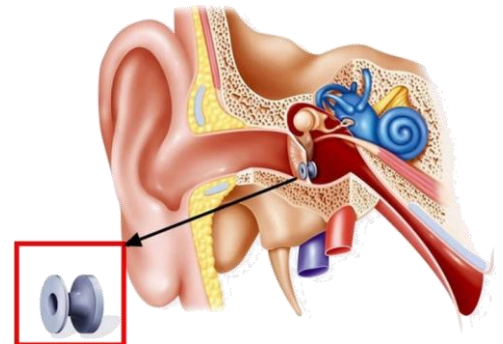
#### Procedures

1. The operations can be performed under local, general or without anaesthesia. (Depending on the circumstances, the doctor will determine the most appropriate type of anaesthesia for the patient)
2. A small incision is made in the eardrum under microscope.
3. Fluid collected behind the eardrum is removed by suction through the incision.
4. A small tube is placed allowing air to flow in & trapped fluid to drain out.

#### Possible Risks and Complications

1. Recurrence
2. Wound bleeding
3. Wound infection
4. Vertigo
5. Hearing loss
6. Facial nerve damage
7. Dislodgement of ventilation tube into middle ear
8. Incision in the eardrum that does not heal after the ventilation tube falls out
9. Implantation Cholesteatoma

\*\* The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operation may be required to deal with the complications.



Source:

<https://www.lmgforhealth.org/wp-content/uploads/2022/03/Difference-between-Myringotomy-and-Tympanostomy.jpg>

## **Pre-operative Preparations**

1. Good hygiene can prevent surgical wound infection. Therefore, we advise you to clean up yourself on the day of operation.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia.
4. No food or drink six hours before operation. (For general anaesthesia only)
5. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
6. Please empty your bladder before the operation.

## **Post-operative Instructions**

### **General**

1. After general anaesthesia, you may:
  - experience discomfort in the throat after tracheal intubation.
  - experience side effects of anaesthesia including feel tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse(s) for ear pain. Analgesics may be given as prescribed by the doctor.

### **Wound Care**

1. Pain with mild discharge from affected ear is common.
2. Always keep affected ear dry and free from pressure.

### **Diet**

A normal diet may be resumed as instructed after recovery from general anaesthesia.

### **Activities**

According to the condition, patient can get out of bed on the same day of operation. Early ambulation can promote rapid recovery.

## **Advice on Discharge**

1. The surgical incision heals on its own and the ventilation tube will usually fall out after 12 months or so.
2. The doctor may prescribe ear drops or antibiotics for a few days after the operation.
3. Please wear ear plugs during swimming to prevent water from entering the ear canal and causing middle ear infection.
4. Immediately consult your doctor or return to hospital for professional attention in the event of severe pain, excessive bloody discharge from affected ear, decrease in hearing, dizziness, persistent ear pain, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
5. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

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Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details  
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

