

Ear Tubes

Ear tubes are placed for several reasons. The most common reason is for recurrent ear infections, which is classically characterized by ear pain, fevers, and decreased hearing. Ear tubes are also placed if the ear drum or middle part of the ear appears unhealthy. For example, there may be persistent fluid in the middle part of the ear that is impeding hearing and speech development. Alternatively, the ear drum may be retracting ('sucked in') beyond a point that your doctor is comfortable just observing. A retracted ear drum can lead to damage to one of the three small bones that help you hear. It can also lead to formation of a cholesteatoma, which refers to skin tissue that has become trapped and leads to a smoldering and erosive infection.

The technical term for ear tubes is myringotomy (making a small cut in the ear drum) along with tympanostomy (placing the tube). It is extremely safe and effective. Complications are minor and usually in the form of infection that is seen as drainage of fluid out the ear canal. If this occurs, it may be treated with antibiotics. The tube usually remains in place for several months, although it may be rejected sooner and fall out, or it may remain in place for years.

Tylenol is usually adequate for pain control following surgery and for ear infections. Occasionally antibiotic ear drops will be prescribed after surgery as well. You can use the ear drops for 3-4 days at a time should drainage recur, such as following an illness or water exposure. Frequent or continuous drainage should prompt further evaluation by your surgeon. Routine follow-up is every 6 months, either with the primary physician or the surgeon, to ensure good placement and function.

As long as there is a tube in the ear, care should be taken to avoid water contamination, especially with bath or lake water. "Dunks in the tub" should be avoided. Water can enter the ear tube and pass through the tube, causing an infection in the middle part of the ear. This is rarely dangerous, but can be a bit uncomfortable and be accompanied by some drainage of fluid out the ear canal. Risk can be minimized by the use of ear plugs, a swim cap, or neoprene headband. These are readily available on Amazon for about \$15.

Rarely, the tympanic membrane fails to heal after tubes have been removed, and the resulting hole may require a surgery to patch it. In some cases, particularly when there is a family history of chronic ear infections, ear tubes may need to be replaced after they fall out. Hearing improvement is usually immediate after fluid has been removed from the ear. Failure to improve hearing indicates a second problem in the middle or inner ear.