

# Children's Ear Nose & Throat Center

Sub-specialists of Dell Children's Medical Center of Central Texas

A member of the  Seton Healthcare Family

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## MYRINGOTOMY AND TUBES

We appreciate the opportunity to care for your child. Please review this sheet as it will help you know what to expect for your child's surgery. Please do not hesitate to call us if you have any questions or concerns.

### What are tympanostomy tubes?

A tympanostomy tube is a tiny, hollow tube that looks like an empty spool. Tubes come in different shapes, sizes, and materials. They are inserted into the eardrum to ventilate the middle ear.

### Why does my child need tympanostomy tubes? How do they work?

Some children develop frequent ear infections or retain fluid in their middle ear after an infection. This is generally because the eustachian tube, a structure that connects the middle ear to the back of the throat, is not working well enough to ventilate the middle ear. By allowing ventilation of the ear, the tubes prevent fluid accumulation and help decrease the tendency for your child to develop ear infections. Fluid in the middle ear can impair hearing and speech development.

### The Surgery

The procedure is done under general anesthesia. It takes approximately 10 minutes. A small incision is made in the eardrum and fluid in the middle ear is removed. The tube will be inserted in the eardrum. The surgery is not painful, and your child will be unaware of the tube in his/her ears.

### Will my child continue to get ear infections after the tubes are placed?

Some children will never have another ear infection with the tubes in place. Other children who continue to develop infections can expect the severity, duration, and frequency of ear infections to be less than that experienced without ear tubes.

### What are the possible complications from ear tubes?

The most common problem encountered after placement of ear tubes is recurrent or persistent drainage from the ears. This occurs in approximately 10-15% of patients. There is a 2% risk that the incision in the eardrum does not heal after the tube comes out. This perforation may heal spontaneously or may require an operation to repair it. In some cases (<1%) the tube may not extrude from the eardrum in the time that we would expect it to do so. If the tube remains in the eardrum for 2-3 years, and the ear problems have resolved, then the tubes may need to be removed surgically and a patch is applied to the opening in the eardrum to assist with healing.

### POST-OPERATIVE INSTRUCTIONS

1. **Activity/Diet:** Your child may resume all normal activities (including bathing and washing hair) and a normal diet after arriving home from surgery. Swimming can start the following day.
2. **Drainage:** It is normal to see drainage, including blood, from the ear canals after placement of ear tubes. Drainage should completely resolve within the first week after surgery. If you notice that bloody drainage continues, throughout the day, use Afrin nasal spray through the ear canal 2-3 times per day, in addition to antibiotic ear drops.
3. **Antibiotic Ear Drops:** You will receive a prescription for antibiotic ear drops. Instill 4-5 drops in both ears twice a day for 3-7 days. This medication will treat any residual infection we could not drain when the tubes were placed and prevent blockage of the tubes. ○ Keep leftover antibiotic ear drops in your medicine cabinet for future use to treat ear drainage. Drainage of pus or blood

from the ear canals may occur shortly after the onset of an upper respiratory illness or sinus infection. If drainage is thick, you may need to clear the ear canal with hydrogen peroxide before instilling the antibiotic drops.

4. **Ear Plugs:** Ear plugs are **NOT** necessary after surgery. You **SHOULD** consider using ear plugs in the following situations:

- Swimming **AND** submerging the head in untreated water such as lakes, rivers, and beaches. This also includes Barton Springs Pool, Deep Eddy Pool, and Schlitterbahn.
- Your child complains of discomfort in his/her ears while swimming, especially if diving deeper than 3 feet below the surface of the water.

Appropriate plugs to keep water out of the ears include cotton balls coated with Vaseline, silicone or putty plugs, or ProPlugs (fitted and sold in our office for \$10/pair)

5. Ear tubes will gradually migrate out the opening of the ear canal, and will in time, fall out like a piece of wax. This takes approximately 9-18 months and is variable with each child and the type of tube inserted.

#### **WHEN TO CALL OUR OFFICE**

Please call the office or after hours number if your child:

- Has a temperature of over 102 F that does not come down with Motrin or Tylenol
- Has persistent vomiting or is unable to drink fluids
- Ear drainage that has not improved within 2-3 days of starting treatment

**FOLLOW-UP:** Please schedule your first follow-up appointment with our office 4 weeks after surgery. An audiogram will take place at that first follow-up visit if the ears are clear and the tubes appear to be functioning properly. Additional visits will be scheduled every 4 months until both tubes have completely extruded.