

CM03 Pinnaplasty (child)

What is a pinnaplasty?

A pinnaplasty is a cosmetic operation to improve the appearance of your child's ears.

Your surgeon will assess your child and let you know if a pinnaplasty is suitable for them. This document will give you information about the benefits and risks to help you to be involved in the decision. If you think your child is mature enough, it is best to discuss the operation with them so they can be involved in the decision too.

If you have any questions that this document does not answer, you should ask your surgeon or any member of the healthcare team.

Is a pinnaplasty suitable for my child?

Your child is most likely to benefit from a pinnaplasty if one or more of the following conditions apply to them.

- Your child is self-conscious about the size or shape of their ears, and they have said this without any prompting from adults.
- Your child is being teased and this is causing them distress. It is important to consider your child's personality. Some children react badly to even mild teasing. If their ears are only a little unusual, a pinnaplasty will not make much difference and the teasing may continue. It may be better to help their social skills so they can cope with teasing.
- Your child has unusually-shaped ears, ears that are big and stick out ('bat ears') or ears that are different from each other (asymmetry).

A pinnaplasty will not improve your child's physical health. For this reason, the operation should only be performed if the aim is to improve their self-confidence and to make them more comfortable with their appearance.

What are the benefits of surgery?

If the operation is successful, your child's ears should have a better shape (see figure 1).

Most children who have a successful pinnaplasty are more comfortable with their appearance.

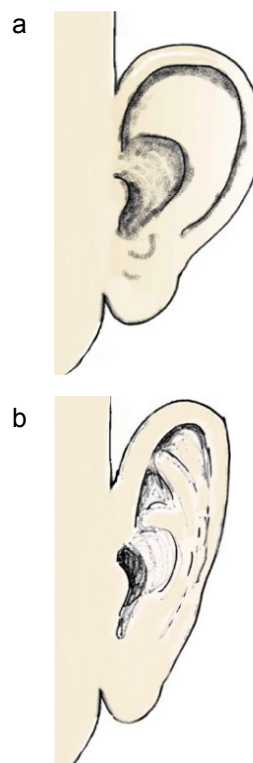


Figure 1

- a Ear sticking out with poorly-developed folds
- b Ear closer to the head with more normal folds

Are there any alternatives to surgery?

In the first six months after birth, the cartilage of a baby's ears is still soft. It is possible to permanently change the shape of the ears using moulding splints. The older the baby, the longer they will need the splints. Once a baby is older than six months, the cartilage will have become too hard and surgery is the only option to change the shape of the ears.

What will happen if I decide my child will not have the operation?

Ears grow to almost their full size by the time a child is 6, while most of the face continues to grow until after puberty. So ears that were more obvious in a child may not be as obvious when the child grows up. It is possible to hide unusually-shaped ears behind a hairstyle. This is normally easier for girls.

What does the operation involve?

For children, a pinnaplasty is usually performed under a general anaesthetic. When your child is asleep, they may also have local anaesthetic injected into their ears. This helps to reduce pain after the operation and your anaesthetist can discuss this with you.

In older children (young adults) the operation can be performed using only a local anaesthetic. If this is the case, your child may be given a sedative.

The operation usually takes about an hour. Your surgeon will make a cut at the back of the ear and peel off some skin from the cartilage. They will change the shape of the cartilage so the ear lies closer to your child's head. Your surgeon may need to use stitches to hold the ear in position and to create folds. Often these stitches can be dissolvable but sometimes your surgeon will need to use stitches that need to be removed (see figure 2).

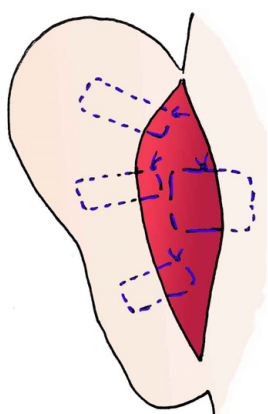


Figure 2

Cuts and stitches used to re-shape the ear

Sometimes your surgeon will also make a cut at the front of the ear and peel back the skin so they can lightly score (notch) the cartilage. This technique tends to make the cartilage bend towards the head (see figure 3).

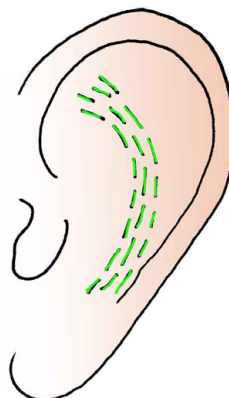


Figure 3

Scoring on the inside of the ear

At the end of the operation, your surgeon will close any cuts with dissolvable stitches or a running stitch that can be removed easily.

Your surgeon will pack the ears with moulding material and place a dressing on your child's head to give the ears support.

What can I do to help make my child's operation a success?

• Lifestyle changes

Your child will have a higher chance of developing complications if they are overweight.

For advice on maintaining a healthy weight, go to www.eatwell.gov.uk.

What complications can happen?

The healthcare team will try to make your child's operation as safe as possible. However, complications can happen. Some of these can be serious. You should ask your doctor if there is anything you do not understand. Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for your child.

The complications fall into three categories.

- 1 Complications of anaesthesia
- 2 General complications of any operation
- 3 Specific complications of this operation

1 Complications of anaesthesia

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

2 General complications of any operation

- **Pain.** Most children do not have any pain soon after the operation because of the local anaesthetic. However, they may need to take simple painkillers such as paracetamol later on the same day and the day after.
- **Bleeding** after surgery (risk: less than 1 in 10). If you notice even a small amount of blood soaking through the dressing or dripping behind the ear, let your surgeon know straightaway. Usually another operation will be needed to stop the bleeding and prevent an unsightly cosmetic result.
- **Infection**, which is usually caused by bacteria from inside the ear getting into the wound. If the ear becomes more painful in the first few days after the operation, let your surgeon know straightaway. Usually an infection can be treated with antibiotics. A serious infection can cause an unsightly cosmetic result.
- **Unsightly scarring** of the skin. Usually the scars will settle over time. However, if your child has dark skin or very pale skin, the scars can sometimes stay thick and red. The risk is higher if the scars are slow to heal. If you notice the scars becoming thick and red, let your surgeon know straightaway. Sometimes the scars can be treated with steroid injections or even by another operation.

3 Specific complications of this operation

- **Cosmetic problems.** It is difficult to predict exactly how your child's ears will look after surgery. Most ears are a different size and shape to begin with so it is normal to have small differences even after surgery. Sometimes the ears may have been set back too much, or not enough, or they may have an unsightly shape from the head dressing. It is possible to have these problems corrected by another operation.

How soon will my child recover?

• In hospital

After the operation your child will be transferred to the recovery area and then to the ward.

It is common for children to feel sick for the first few hours and not want to eat anything until the following day.

Your child should be able to go home the following day. However, if all is well your surgeon may allow you to take your child home later the same day.

If you are worried about anything, in hospital or at home, ask a member of the healthcare team. They should be able to reassure you or identify and treat any complications.

• Returning to normal activities

Your child should rest and avoid strenuous activities for the first few weeks while the swelling and bruising settles down. If you notice any bleeding or your child's ear becomes more painful in the first few days, let your surgeon know straightaway.

It is important to watch your child to make sure they do not remove the head dressing or try to touch their ears.

Your surgeon will ask you to come to the clinic after one to two weeks to remove the head dressing and any stitches. Your surgeon may recommend that your child wears a headband and light head dressing at night to prevent their ears from folding and causing an unsightly cosmetic result.

Your child can go back to school after the head dressing has been removed. However, you may want to wait another week or so until it is difficult to tell they have had surgery.

Your child should avoid any sports activities for six weeks.

• The future

The results of a pinnaplasty are usually permanent. However, if your child has had permanent stitches, these may need to be removed at some time in the future if they cause problems.

Summary

A pinnaplasty is a cosmetic operation to improve the appearance of your child's ears. The operation should only be performed if the aim is to improve their self-confidence and to make them more comfortable with their appearance. You should consider the options carefully and have realistic expectations about the results.

Surgery is usually safe and effective. However, complications can happen. You need to know about them to help you make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

Further information

- For advice on maintaining a healthy weight and information on how exercise can help you, go to www.irishheart.ie
- www.aboutmyhealth.org - for support and information you can trust

Acknowledgements

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Illustrations: Mr Eoin O' Broin MD FRCS (Plast)

Local information

You can get information locally from:

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This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

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