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Ambulante Operationen

## Prominent ears

### **The minimal invasive correction of prominent ears without incision.**

The cosmetic correction of prominent ears can be realized outpatient under local anaesthesia.

Preceding the intervention, the patient may demonstrate the desired ear shape in front of a mirror. With a minute needle the outer ear is anaesthetized on few spots. The new ear shape is fixed with special stitches. The stitches are located in the cartilage, are transparent and do not dissolve.

This method is called the minimal invasive method (soft surgery), especially suitable for adults.

As with any surgery, complications may occur after the intervention, for example inflammation, secondary bleeding or ear pain. With the stitch method it may as well be possible, that one or more stitches come off the cartilage, if another person pulls heavily on the ear.

Since the stitches are tied, very rarely, a small end of a stitch can emerge later on through the skin. However, this can be redressed easily. In addition in very few cases it is possible, that the stitch knot may be visible from outside as a tiny curvature. But mostly it does not bother cosmetically. During one day a head bandage should be worn.

Right now we cannot look back on decades of experience with the stitch method. Therefore it should be applied low-keyed for children, since the childish ears are still growing.

**We recommend other methods for children and adolescents, like the "Scratch technique" and the "Conchaplastic".**

The **Scratch technique** consists in scratching the cartilage behind the ear with an incision. The cartilage bends to the back spontaneously, whereas the manner of the scratch determines the bending direction. The bending is soft and without sharp edges. In addition there is the advantage that no cartilage needs to be removed. An eventually necessary correction due to unsatisfactory results is therefore easily feasible.

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The **Conchaplasic** consists in removing a sickle-formed cartilage part on the front or back of an ear. While cutting on the front part the surgeon has a better overall view and possesses a better quality control. That is why we prefer the incision on the front part of the ear when carrying out this technique. The about two cm large scare is located on the inner side of the outer ear and can hardly be seen afterwards. For 5-7 days a head bandage has to be worn.

Depending on cause and form of the outer ears a combination of different methods may be applied. With kids the operation should always be done under general anaesthesia.

With the correction of prominent ears it is important that no kink formation or sharp edges emerge. The ears should look naturally.