

If you have any questions or concerns, please do not hesitate to contact the paediatric team on 0161 447 6914 or main reception on 0161 447 6677.

Spire Manchester Hospital does not have an accident and emergency department therefore if your concerns are of a serious nature please seek immediate medical attention from your local accident and emergency department.



**Spire** Children and Young  
People's Service

## Patient information

# Paediatric mastoidectomy

This leaflet provides some standard information and advice about mastoidectomy. However, you should always follow the instructions of your child's consultant.

If you have any unanswered questions or concerns, please do not hesitate to ask your child's consultant or nurse for more information. It is natural to feel anxious, but knowing what to expect can often help.

The information contained in this leaflet is not intended nor implied to be a substitute for professional medical advice nor is it intended to be for medical diagnosis or treatment.



**Spire**

Manchester Hospital



Children's Ward: 0161 447 6914



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## What is the mastoid bone?

The mastoid bone is the bony prominence that can be felt just behind the ear. It contains a number of air spaces and connects with the air space in the middle ear. For this reason ear disease in the middle ear can extend into the mastoid bone.

## What is mastoid surgery?

Mastoid surgery is an operation on the mastoid bone and middle ear. This operation may be necessary when infection within the middle ear extends into the mastoid air cells, or when cholesteatoma develops in the middle ear and mastoid airspaces.

Cholesteatoma is 'bad skin' that grows behind the eardrum that causes ear infections and can erode the structures in the middle and inner ear (including the bones of hearing and the hearing organ). Cholesteatoma may cause recurrent ear infections and hearing loss, occasionally imbalance, and rarely facial weakness and infection within the cranial cavity (involving the brain and its fibrous coatings).

## Ear dressings after the operation

Your child will have a dressing on the outer part of their ear which is held in place by a head bandage. This is normally removed 2-4 hours after the operation. Your child will usually be discharged from hospital on the day of the operation.

They will also have a special dressing (packing) in their ear canal. This stays in place for 1 - 6 weeks dependent upon the type of pack and is removed in the outpatient clinic.

Your child may also have stitches at the site of the wound, either in front or behind the ear. Usually the stitches are dissolvable and do not need to be removed (they can remain for up to 4 weeks before dissolving). Your nurse will advise if, and when, these will need to be removed.

## When your child goes home

Your child may experience some discomfort, especially in the first few days after the operation. Give regular paracetamol and additional ibuprofen if more pain relief is needed, but please follow the instructions on the bottle.

There may be a little bleeding from the ear canal or from the wound behind the ear for a few days after the procedure.

Please keep your child's wound dry for the first week after surgery. When showering or washing your child's hair you should place cotton wool coated in Vaseline in the bowl of the ear until your child's consultant removes the ear pack and instructs you that it is ok not to waterproof the ear.

The dressing (packing) used is usually either a special sponge (POPE wick) onto which you will be asked to place antibiotic drops, or ribbon coated in antiseptic (BIPP pack). A POPE wick is usually removed after 1-2 weeks and BIPP packing after 4-6 weeks.

If the BIPP packing in your child's ear starts to come out, trim the excess with a pair of clean scissors, but do not try to push it back in. If a considerable amount, or all, of the packing comes out please contact your child's consultant.

Your child should not take part in contact sports for at least 4 weeks, and discuss timings of return to these activities with your child's consultant.

Your child can return to school after a few days when they have fully recovered from the

anaesthetic and any pain is fully controlled. You should not take your child swimming until advised by your child's consultant.

Most children recover quickly from this operation, although a small amount of discharge from the ear canal is normal. If it becomes heavily bloodstained, smelly, or excessive, you need to contact the paediatric ward, see your GP, call NHS 111, or take your child to the nearest accident and emergency (A&E) department. They may have an infection that needs treatment. Rarely, a child reacts to the ear dressing (packing) and can develop swelling, redness and blistering of the ear. You should seek urgent medical attention if you suspect this is happening.

## Contact the hospital if your son develops any of the following symptoms:

- Your child is in pain despite the use of paracetamol and ibuprofen
- They have a raised temperature
- Your child is generally unwell or you are concerned about anything

You should have been advised about any follow-up appointments that have been made for your child.