



Spire Children and Young
People's Service

Patient information

Paediatric myringoplasty

This leaflet provides some standard information and advice about having a myringoplasty. 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.

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	Main reception: 01925 265 000
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Spire
Cheshire Hospital

What's a myringoplasty?

A myringoplasty is an operation to repair a hole in the eardrum (perforation). A hole in the eardrum can increase the risk of ear infections and may prevent the eardrum (tympanic membrane) from vibrating properly, so can cause your child hearing problems.

About the operation

A myringoplasty operation involves taking a graft and placing it underneath the eardrum to support repair of the hole by the eardrum growing over and closing it. Various grafts may be used including the tough fibrous coating surrounding the muscle above the ear (temporalis fascia). The fibrous coating covering the ear cartilages (tragal or conchal bowl cartilage) may be used and on occasions ear cartilage is also used to further support the graft.

The surgery may be performed down the ear canal (permeatal), or via a cut made behind the ear (post-auricular incision). The choice of incision is determined by the consultant's preference, the size and the position of the hole in the eardrum. At the end of the operation a dressing will

be inserted into the ear canal. The consultant may wish for the dressing to stay in place for about 2-6 weeks to allow the graft to heal.

After the operation

When your child comes back from the operation you will notice a bandage placed around their head if a post-auricular incision was needed. Head bandages are usually removed after a few hours.

Looking after your child at home

Your child may hear squelching or popping sounds which is usually caused by the dressing and will stop when the dressing is removed.

Your child may feel discomfort when opening and closing their mouth or when lying on the affected side. This soreness/stiffness may last up to 2 weeks and will be relieved with simple pain killers.

You should discourage your child from blowing their nose or trying to stop a sneeze. As this will raise pressure in the eardrum and may dislodge the graft.

Try to keep the ear dry when washing and bathing. No swimming until your consultant advises it.

Try to avoid contact with people who have colds or flu for about a month after the operation as an ear infection may damage the graft.

No school or nursery for a week to 10 days. No sports activities until advised by your consultant, to allow the complete healing of the graft.

Contact the hospital if your child develops any of the following symptoms:

- Your child develops a fever
- You suspect your child has an ear infection
- Your child's pain cannot be controlled by pain killers.

If you have any questions or concerns, please do not hesitate to contact the ward on 01925 215 070 or main reception on 01925 265 000.

Spire Cheshire 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.