Myringotomy and/or Ear Tubes in Adults

When medical therapy is ineffective, tympanostomy tubes (ear tubes) may be recommended for the treatment of chronic ear fluid, recurrent ear infections, and hearing loss. “Ear tubes” may also be recommended for problems with pressure and “popping” of the ears, usually from allergies or exposure to altitude changes. Alternatively, the physician may recommend only a myringotomy. This means that an opening is made in the eardrum, but a tube is NOT placed through the eardrum. The eardrum usually heals up on its own after a few days.

The procedure is usually done in the office, by using a local anesthetic to numb the ear drum. A small incision is made in the eardrum, which allows drainage of ear fluid. Sometimes the physician then inserts a tube into the eardrum. Sometimes it will be done in the operating room.

Tympanostomy tubes usually stay in place from 9-18 months and fall out as the eardrum regenerates. The tubes are not visible and are generally not noticeable. Initially, there may be a sensation of hearing your own voice and/or pressure, but this usually goes away with time. Ear tubes reduce the severity and frequency of infections, fluid, and hearing loss, but cannot reverse the underlying reasons for the ear disease (allergies, eustachian tube dysfunction etc.).

The ear tubes work by allowing drainage of fluid behind the eardrum and improving function of the middle ear (the cavity behind the eardrum). When the tubes are in place, it is not unusual for patients to have drainage when they get “colds” or allergy symptoms.

Placement of ear tubes has a few risks. When the tubes fall out, less than 5% of patients will have a small hole in the eardrum (perforation) that could require additional surgical repair.

Instructions after the procedure

It is not unusual to have ear drainage after surgery. Sometimes this drainage can be bloody, which can be a sign of inflammation. If you are prescribed ear drops, use them as directed (the drops can “burn.”)

Mild ear pain may require treatment with Tylenol.

Normal activity can usually be resumed the day of the procedure. Most people are able to drive home from the office.

Water should be kept out of the ears for 5-7 days. This can be done by placing a cottonball covered with Vaseline Petroleum jelly in the ear canal. This is not necessarily a sign of infection. Avoid the use of Q-tips.

Usually earplugs are not needed during swimming and other water exposure while the tubes are in place. Please keep your appt as scheduled or be sure to call back to make follow-up as directed by physician.

Please call us at 972-731-7654, option 3, to speak to a nurse or leave a message, if you have questions or concerns. To help us provide timely care, please spell the patient’s first and last name, as well as note the date of birth, and BEST phone number.

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