CORRESPONDENCE

An easy supplement to ear surgery post-operative dressing

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Dear Editor,

The goal of otoplasty surgery for prominent ears is to normalize the shape and position of both ears with maximal symmetry. The aim of the post-operative dressing is to maintain the designated shape and position, and to confer a degree of compression in order to prevent hematoma formation[1].

Often, post-operative dressing in otoplasty is distressing for the patient—usually a compression, as reported in medical literature with several techniques, is left in place from five days up to 12 days post-op[2].

In our practice, to reduce patient’s post-operative ear dressing discomfort, we fix it with a 2/0 percutaneous suture (VICRYL, Ethicon, Johnson and Johnson) and a gauze with triticum vulgare (Fitostimoline® garze, FARMACEUTICI DAMOR S.p.A., Napoli) on the area where the ear is undermined during surgery (e.g., concha and antihelix) (Figure 1). Then, we perform a slight compression with cotton wool pad, the so-called “turban medication”, which is left in place for only 48 h instead of five days.

With this new post-operative ear dressing, we treated 46 patients (91 ears, of which 1 case was monolateral), and haematoma or others complications never occurred within last year. After only 48 hours after surgery, the patients did not have to wear any post-operative dressing, which gave a high positive social impact (Figure 2).

The addition of these two stitches, together with the affixing of the two gauzes in the areas where an undermining was performed, would avoid any dead space and the need for a visible turban medication for more than two days. In our practice, this approach dramatically increased patient’s satisfaction by reducing the discomfort of a visible post-operative ear dressing.

Figure 1. The two percutaneous sutures placed after surgery, fixing the gauzes to avoid dead spaces
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**Figure 2.** The removed post-operative ear dressing (at 48 h after surgery); no more post-operative dressing need to be worn by the patient

**Conflict of interest**

The authors declare no potential conflict of interest with respect to the research, authorship, and/or publication of this article.

**References**
