

Patient Advice Sheet on Mastoid Surgery
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What is the mastoid process?

It's a bit of your skull. It pokes down behind your ear. It has air cells in it like an Aero bar.

What is the middle ear?

At the inner end of the ear hole is the ear drum. On the other side of the ear drum is the middle ear. It is an air filled space. The air spaces of the middle ear and mastoid connect up.

Why is the operation necessary?

There is a deepseated infection in the middle ear & mastoid. Often skin grows into the mastoid from the ear drum. It wears bone away. It often gets infected. It is called a cholesteatoma.

What good will the operation do me?

Infection in the skull may be dangerous. It can cause infection in and around the brain. We operate to make the ear safe. We hope to make the ear dry. We may improve the hearing. If we do it is a bonus. We will do our best. We can give no guarantees. We may not manage any of these aims.

Do I need the operation immediately?

No. The problem only becomes very slowly worse over the years.

What is mastoidectomy and how is it done?

We remove the diseased bone. We drill it away. We cut behind the ear. Sometimes we cut just above and in front of the ear. If there is a hole in the drum we repair it. We use tissue from near the ear. We take away the back wall of the ear canal. The hole in the mastoid and the ear canal is then one large cavity. We can clean it out. We can treat infection with drops or dressings.

What will my ear look like afterwards?

The scars quickly become difficult to see and the ear looks normal.

Do I need what is to be removed or not?

Yes. To hear with. But you have two ears. You may be able to use a hearing aid. The disease may have damaged your hearing already. If not, it's likely it will in future.

Do I have to have this operation?

No. It is up to you. We call it elective. Without surgery the infection will become slowly worse.

What are the alternatives?

None. We have usually tried cleaning the ear and drops and dressings already.

Will I be asleep?

Yes. This is called general anaesthesia.

What can go wrong?

Serious complications are uncommon. The risks are similar to everyday life. Such as flying, driving a car or crossing a busy road. Some other risks are:

- We may need to remove bits of the middle ear. This can make your hearing worse. We will try to replace them if we can.

Mastoid Surgery

- Your inner ear may be damaged. It may not work at all. This is called a dead ear. A hearing aid won't help.
- The facial nerve crosses the middle ear. It may be damaged. This causes weakness of the face. The weakness may be permanent.
- The membrane (skin) around the brain lies just above the ear. It may be damaged.
- The nerve of taste crosses the ear. If it is damaged you lose taste on one side of the tongue. You have lots of "taste" nerves left.
- The operation may not work. You may need further surgery.

After the operation

You usually stay in hospital overnight.

Take two weeks off work.

You may have a bandage on overnight.

You will have a dressing inside the ear for a few weeks. This has a yellow antiseptic on it.

Your GP practice nurse can remove the stitches at five to seven days.

Sometimes we use glue or dissolving stitches. These do not need removing.

The ear usually discharges for a while. This may be yellow and/or blood stained.

You may have some pain for about a week. The ear will feel blocked.

You may feel dizzy. This usually settles in 24-48 hours. It can last longer.

The ear may get infected. The pain will get worse. Phone the ward for advice.

Does my allergy to iodine make a difference?

Yes. The usual dressing has iodine in. Please warn us. We will use something different.

What should I not do after the operation?

Avoid:

- colds for two weeks;
- crowds for two weeks;
- getting the ear wet.
- excessive activity such as heavy lifting for two weeks.
- blowing your nose hard as it can blow the graft off.

What medicines do I need to take home with me?

You will probably have some painkillers. These are a little stronger than aspirin. We may give you antibiotics. If you are dizzy we will give you something to help.

What do I do if anything seems to go wrong?

Phone one of the numbers below.

When will you need to look at my ear again? How often? For how long?

Usually a few weeks after the operation. Then quite often for some months. A mastoid operation takes three months on average to heal. We need to clean wax out of most cavities for ever. We do this every six to twelve months.

May I ask a question?

At any time. You can also refuse to have the operation at any time. If you ask a question please ask someone suitable. A junior doctor or nurse may not know what you want to know. Please do not ask several doctors the same question and compare answers.