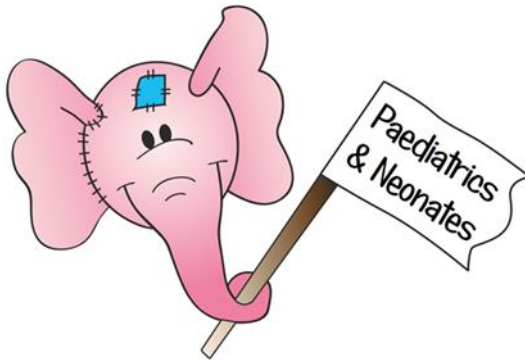


Myringotomy operation with or without grommets

Children's Ward

Patient Information Leaflet



Introduction

This leaflet is for young people who are considering having a myringotomy operation, with or without grommets. It gives information on what the operation is for and what it involves.

If you have any questions or concerns, please contact a member of the Children's Ward.

What is a myringotomy operation?

It is an operation to make a small cut in the eardrum. This is to:

- relieve pressure in the ear, caused by a build-up of fluid
- or to drain pus out of the ear

The operation is sometimes suggested for people who:

- have hearing problems
- keep getting ear infections
- have a build-up of mucus in their middle ear, called glue ear

The operation is carried out using a general anaesthetic. This means you will be asleep for the operation. The person who gives you the general anaesthetic is called an anaesthetist.

The anaesthetic is given to you through a cannula that is put into the back of your hand. A cannula is a thin, plastic tube (please see figure 1).

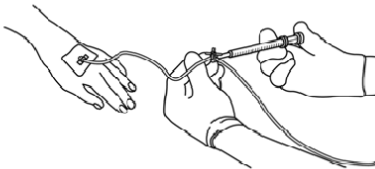


Figure 1 shows a cannula

Why do people get these problems?

The ear is divided into three parts; the outer, the middle and the inner ear. The middle ear is a space behind the ear drum which should be filled with air.

When you swallow, the air in the middle ear is replaced. This happens through a tube, called the eustachian tube, that connects the ear to the nose.

Glue ear is a build-up of fluid in the middle ear air space. It happens when the eustachian tube does not work properly. There are various reasons for this. These include:

- things that irritate the tube such as allergies
- swollen adenoids – adenoids are small lumps of tissue at the back of the nose
- infection

Glue ear can cause problems with hearing as the fluid build-up does not allow sound to travel through the ear as it should.

Some people keep having problems with glue ear. In these cases, the surgeon may put a grommet into the ear drum. A grommet is a hollow, plastic tube that is left in the ear after the operation. A surgeon is the person who does the operation.

How do grommets work?

Grommets work by making the air pressure the same, in and outside of the middle ear. They also help to drain fluid out of the ear.

Usually, grommets gradually come out of the ear after about six to eight months, and the ear drum heals. Sometimes they need to be replaced, by another operation using general anaesthetic.

What are the benefits of the operation?

The operation should:

- improve your hearing
- reduce any earache you are getting

What are the risks of the operation?

There is a very small risk of bleeding, infection and damage to the eardrum. You can discuss this in more detail with your hospital doctor.

Some people who have grommets develop a runny ear. If this happens, you will need to visit your family doctor. They will give you drops or antibiotics to treat it.

(Antibiotics are medicines that kill bacteria.) If it keeps happening, you may need to go back to hospital to see the doctor there.

There are some very rare risks when people have a general anaesthetic. Your anaesthetist will talk to you about these.

Are there any alternatives?

If your ear problem is due to infection, it may be treated with antibiotics. However, if these do not stop the problems, your hospital doctor may suggest that you have the operation.

What do I need to do before the operation?

If you are having your operation in the morning, you must not eat anything after midnight. That means no breakfast. You can have a drink of water or squash before 6.30 am. You may be able to have a drink of water or squash when you arrive on the ward. The nurse will discuss this with the surgeon and will let you know.

If you are having your operation in the afternoon, you can have a light breakfast of toast, but not anything with milk (no cereal), you can also have a drink of water or squash. You can have a glass of water or squash at 11am before you come into hospital. You may be able to have a drink of water or squash when you arrive on the ward. The nurse will discuss this with the surgeon and will let you know.

If your operation is in the afternoon, it is a good idea to bring an overnight bag, just in case you need it. Include pyjamas, slippers, wash things, hairbrush, toothbrush and toothpaste. You should also bring any medications that you take, like inhalers.

You must bring your mum, dad or carer with you.

What happens when I come for the operation?

You will have an appointment for the morning or the afternoon.

When you arrive at the Children's Ward, a nurse will ask you some questions and do some tests such as taking your:

- blood pressure
- heart rate
- breathing rate

The nurse will put a wrist band on each of your wrists and put cream on the backs of your hands. This cream is sometimes called magic cream. It makes the back of your hands numb so that you do not feel any pain. It is used so that when the anaesthetist puts a cannula into your hand to give you the anaesthetic, you will not feel this being put in.

The surgeon will come and see you and explain the operation to you. If you want to have the operation, the nurse will ask you and, if you are under the age of 18, your parent/guardian, to sign a consent form. This means that you are giving your permission for the surgeon to do the operation.

The anaesthetist will come and see you to check that you are well enough to have the operation.

The surgeon has a lot of operations to do and so there is a list of these. The surgeon does the operations in the order on this list. The nurse will be able to give you a rough idea of the time you will have your operation. However, sometimes there are delays if operations take a bit longer than they thought.

If you have any questions or worries, please ask the nurse who is looking after you.

What happens when I go for the operation?

A nurse will take you to the anaesthetic room to have your anaesthetic. Your mum, dad or guardian (only one of them) can go with you to the anaesthetic room and stay with you until you are asleep. Nurses will be looking after you all the time that you are asleep.

What happens after the operation?

When you wake up, you will be in a recovery room with a nurse. When the nurse is happy that you have recovered, they will take you back to the Children's Ward to your mum, dad or guardian.

You may still have a cannula in your hand when you go back to the ward. This can be used to give you medicine, if you need it. For example, some people feel sick after having a general anaesthetic.

If you feel sick, tell your nurse and we can give you some anti-sickness medicine. We will take the cannula out before you go home.

When you are back on the Children's Ward, the nurse will give you a drink and some food, if you want it.

Will it hurt?

Some people have earache for a couple of days after the operation. We will give you medicine to get rid of the pain (painkillers) while you are having your operation. This is so that when you wake up, you should not feel any pain.

We will also give you painkillers regularly when you get back to the Children's Ward.

When you get home, it is a good idea to have painkillers regularly such as Calpol. You must always read the label on this medicine and not take more than it says on the label.

If the pain does not go away after a few days, please speak to your family doctor or the Children's Ward. The number of the Children's Ward is:

01384 244271

When can I go home?

After your operation, we hope that you will only need to be in hospital for a few hours. However, you may need to stay for one night, if your hospital doctor thinks that is a good idea. Either your mum, dad or guardian can stay with you for the night.

After this time, you can go home when:

- You have eaten enough food and drink.
- You are not having any bleeding from your ear.
- You have had a wee.
- You are not being sick.
- You have a normal temperature.
- Your hospital doctor says you are well enough to go home.

When you do go home, it is best for you to travel in a car, as on public transport (buses, trains, metro) you are more likely to get an infection.

What happens when I get home?

- During the first couple of days, some fluid may come out of your ear, which is sometimes blood-stained. You can gently wipe this away with cotton wool. Do not try and clean inside your ear as this could damage your ear.

If after a couple of days fluid is still coming out of your ear, you will need to see your family doctor for a check-up.

- It is very important to keep your ears dry to prevent infection. Therefore, when washing your hair or having a bath or shower, you will need to protect your ear. You can do this by putting some Vaseline on some cotton wool and gently putting this into the outside of your ear.
- You can travel on an aeroplane, if you need to, without it causing you any problems.

When can I go back to school?

You can go back to school two days after your operation, if you feel OK.

Can I go swimming?

You can go swimming unless your doctor tells you not to. However, you must not dive under the water. You will need to protect your ear in one of these ways:

- Putting some Vaseline on some cotton wool and gently putting this into the outside of your ear.
- Buying some special ear plugs from a pharmacy or sports shop.
- Buying some 'Ear Putty' mouldable ear plugs from Barworth Medical:

01793 729229

<http://www.barworthmedical.co.uk/index.html>

What happens if I become ill?

If you feel ill, are sick or have a temperature when you get home, you will need to contact your family doctor or the Children's Ward. The number of the Children's Ward is:

01384 244271

Will I need to see the hospital doctor again?

You will need to see your hospital doctor in the Ear, Nose and Throat (ENT) Clinic. This is usually two or three months after your operation. You may also need to see a doctor from the Audiology Department. Audiology doctors are specialists in dealing with hearing problems.

We will send you appointments for these through the post.

Can I find out more?

The NHS Choices website has more information about glue ear:

<http://www.nhs.uk/Conditions/Glue-ear/Pages/Introduction.aspx>

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

The Children's Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dgft.nhs.uk/services-and-wards/paediatrics-and-neonatology/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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