

Tubes

Bilateral myringotomy with tube insertion is the second most common surgery done in America. During this surgery a small tube is placed into the eardrum. This tube allows air to pass from outside of the body into the middle ear. This air flow allows your body to clear out infections and fluid before it causes a problem.

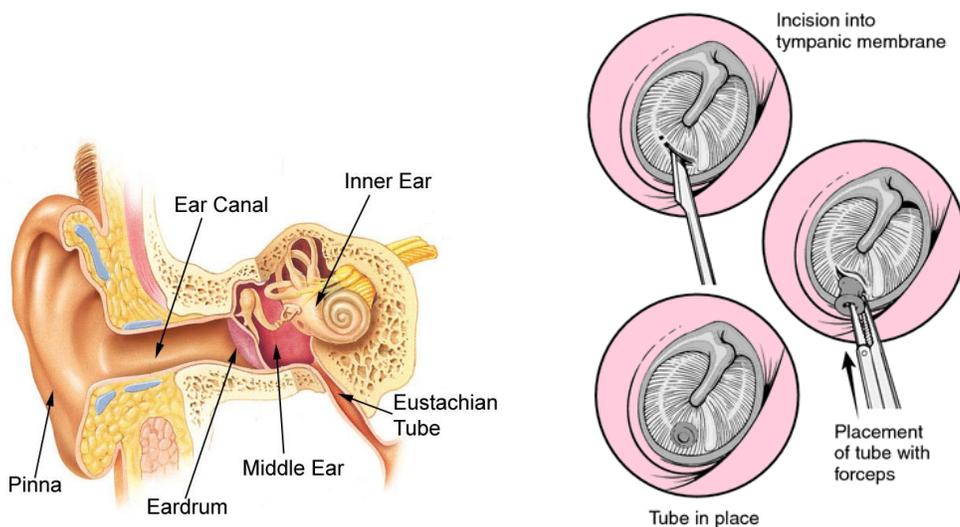
Why do you put tubes in: Mostly for repeat infections in the middle ear. It is also often needed to drain fluid in the middle ear that will not clear. This fluid will not only set someone up for infections, but it will also block part of the sound that enters the ear.

How do you put tubes in: A small incision is made in the eardrum and the tube is placed in this incision. In adults this tube is placed in the office with a small drop of numbing medication, or a numbing shot. Children are not able to hold still, especially for the painful numbing shots, and so they are taken to the operating room where gas is used to put them to sleep. No IV, breathing tube, or other invasive procedures are usually needed.

Important post-op instructions: Eardrops are given for the first few days. These drops are to keep blood from blocking the tube and preventing airflow. After the first few days of use be sure to keep the eardrops for any ear infections. They will not only wash out any infection out of the ear, but they will also deliver a dose of antibiotics 100 to 1000 times higher than oral antibiotics, and deliver them directly to the infected middle ear.

Long term ramifications: There are very few long term ramifications. The tubes fall out on their own in 6-12 months most of the time. Someone with tubes in their ears will need to be followed every 3-4 months as long as the tubes are in. If the tubes are still in after 2 years they usually will be taken out and the eardrum patched.

How long does surgery last: The surgery is very short, and usually only lasts 2-5 minutes. The surgery may only take a few minutes, but the time to put the patient to sleep and wake them up can take up to 30 minutes to an hour before the surgery and then the time needed for the patient to wake up.



I usually make a radial incision, in line with the blood vessels (about the same orientation as the black lines in this picture)

Actual tubes on a penny for size comparison