

## RISKS AND COMPLICATIONS OF TYMPANOPLASTY AND MASTOIDECTOMY

PLANNED OPERATION: \_\_\_\_\_

Tympanoplasty and mastoidectomy are procedures designed to remove infection from a chronically diseased ear and repair and rebuild the eardrum and little bones of hearing, helping to restore hearing and remove the infection from the ear.

A tympanoplasty or tympanomastoidectomy may help your ear problem. As with any surgery, there are also risks. You must keep in mind that you may not benefit from the surgery and that there is a slight chance your hearing may be worse after surgery. The following information will help you understand the results and risks of a tympanoplasty or tympanomastoidectomy. The substantial risks include:

**1. Hearing:**

Although most of our patients experience a hearing improvement after surgery, some have the same hearing, and a few have a further or complete hearing loss. At times, we may do a second procedure to attempt hearing improvement.

**2. Dizziness:**

Dizziness may occur immediately following surgery due to swelling in the ear and irritation of the inner ear structures. Some unsteadiness may persist for a week postoperatively. Only rarely is dizziness prolonged in patients.

**3. Taste Disturbance/Tongue Numbness:**

The nerve that supplies one-third of the taste to the tongue runs through the middle ear and may have to be pushed aside or cut to do the ear surgery. Therefore, temporary taste disturbance or tongue numbness occurs in many of our patients and usually lasts about three months. It can last as long as one year, and permanent taste disturbance or tongue numbness and dryness of the mouth occurs occasionally.

**4. Tinnitus or Ringing:**

Ringing in the ear is often present in patients who have hearing loss. Therefore, most patients already have ringing before surgery. After surgery, ringing may or may not be changed. It could be better or, less commonly, worse.

**5. Facial Nerve Paralysis:**

The left and right facial nerves control movement. A separate nerve runs through the middle ear and mastoid bone on each side of the head. Temporary paralysis is possible due to swelling or bruising of the facial nerve. If a severe injury to the nerve occurs, a residual weakness will remain permanently.

**6. Perforation:**

Our purpose is to close the eardrum hole, but not all patients heal the same, and the hole may reappear. Nearly all our patients have an intact eardrum after surgery, but some do develop another perforation.

**7. Infection:**

The major purpose of this surgery is to remove infection, and the chance of infection clearing is very high. However, we are not always successful in curing infection with the surgical procedure. In some cases, a two-stage operation is necessary, especially if we find a cholesteatoma (skin disease in the ear).