



Earlobe Surgery

Earlobe surgery is done to reshape or repair earlobes and can be done for a variety of reasons.

Indications for ear lobe surgery

- Split or torn earlobes from heavy earrings stretching the piercing over time or getting caught and pulled
- Earlobe reduction which reduces the size of large earlobes
- Repair of earlobe stretchings and tunnels
- Reshaping earlobes where periauricular facial surgery scars have distorted the shape

Procedure details

The surgery is usually carried out under local anaesthesia (while you are awake after the skin has been numbed) unless it is being performed as well as other larger surgery e.g. a facelift. The procedure usually takes between 15 and 60 minutes depending on the extent of surgery. Both earlobes can be reshaped at the same time. The earlobe is reshaped or repaired and stitched together carefully.

If you have more than one split in your earlobe and they are close beside each other, it may be necessary to either to repair them as one split i.e. removing the central sliver of skin or to stage the repair i.e. repair one split, let it heal and then repair the other. This is because very thin strips or slivers of skin can suffer damage to their blood supply if surgery is done to both sides of the strip at the same time.

Post-operative course

Usually the area is dressed with brown surgical tapes. These will withstand a quick splash of water or a quick shower but not a prolonged shower or a bath. You can shower carefully the day after surgery and gently dab the tapes dry. You may use a hairdryer on a cool setting to speed up drying of the tapes before dressing. If non-dissolvable stitches are used, they will need to be removed between 7 and 10 days following surgery. When possible, Ms Nugent uses absorbable sutures, which do not need to be removed. It is usual to have some swelling and bruising in the area in the early stages.

Recovery

It is usually possible to return to light activities the next day but strenuous activities will need to be avoided for about 2 weeks. The area is usually healed in 2 to 3 weeks, but the scar will continue to strengthen and then to soften and fade for 12 to 18 months afterwards. Most of the changes in the scar occur in the first 6 weeks but it continues to slowly change after that.

Scar management

Once healed, Ms Nugent usually advises moisturisation and massage of the scar with a Vitamin E or a plain moisturiser 2 to 3 times daily. This helps to soften the scar. If your scar shows any signs of being raised or lumpy or slow to settle, she may advise use of silicone ointment or sheets on the scar or further scar treatments. It is also important to protect your scar from the sun.

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Piercing after surgery

If you wish to pierce your earlobe, Ms Nugent advises waiting at least 6 months after surgery and placing the piercing away from the surgery scar if possible. If your original problem was from the weight of heavy earrings stretching a piercing, she also advises avoiding prolonged periods of wearing heavy earrings or only wearing light earrings to prevent recurrence of the stretching effect.

Expected results

Earlobe reshaping and repair usually gives a very natural appearance and an improved shape to your ear. There will be a small scar in the earlobe, but this usually fades well and is inconspicuous. If you have extensively stretched ear lobes or large tunnels, while the surgery reconstructs your ear lobe and usually gives a good result, it is not always possible to restore your earlobe to the appearance it had prior to the stretching or creation of the tunnels.

Complications

Early complications (within the first week of surgery)

Bleeding (haematoma)

It is common to have a small amount of bleeding over the day following your procedure. Holding firm pressure for 10 to 15 minutes with a clean towel or tissue is usually sufficient to stop this. If this is more than expected, please contact the hospital or clinic so that you can be advised or assessed. Rarely, a return to the procedure room is required to stop bleeding.

Infection

Rates of severe infection in earlobe surgery are low. Minor wound infections or inflammation may occur - if it does happen, an infection will be treated with antibiotics. Rarely, a return to the operating theatre to wash out the wound might be required.

Intermediate complications (within 6 weeks of surgery)

Delayed wound healing

In some people the wounds take longer to heal than in others: this may be due to having had a mild infection of the wound, due to a reaction with the stitches or from "overdoing it" straight after surgery. Normally this is a minor inconvenience, which can be managed with observation or special dressings as an outpatient. Occasionally it can lead to a troublesome infection developing as described above.

Wound dehiscence

Occasionally some of the wound can open or gape. This is normally only a very small area and can be managed by observation and wound care. It usually does not leave any lasting problems. Rarely, the wound may need to be resutured or a revision procedure needed at a later date.

Asymmetries and irregularities

While no-one is perfectly symmetrical, and no two earlobes are 100% symmetrical, every effort will be made to achieve good symmetry after your surgery. However, there will inevitably be subtle differences between each side. Occasionally there are significant asymmetries and irregularities that need to be addressed with further surgery (a revision operation).

Late complications (more than 6 weeks from surgery)

Poor scar formation

Scarring will occur whenever the skin is cut and of course, every effort is made to place scar lines where they will heal well and be least visible. Although scarring on average is minimal, scar maturation varies from person to person and occurs over 6 to 12 months, with scars passing through a red, itchy and lumpy phase, prior to settling down to thinner, softer less distinct lines. Normally the scars from earlobe surgery heal well and are barely perceptible but occasionally, they may tend to thicken and may require steroid injections to help them settle down. In some cases, surgical scar revision surgery may be needed. Hypertrophic or keloid scars can occasionally occur – these are thickened and lumpy scars that are more common in people of Asian or Afro-Caribbean descent.

Notched or altered earlobe shape

While the aim is to give a natural, curved shape to the earlobe, sometimes scars can tighten when healing and alter the intended shape. This is usually to a very minor degree not requiring treatment but occasionally a revision procedure is needed to improve the shape.

Recurrence of stretch or split in earlobe

While it is possible to repierce ears and wear earrings again after earlobe surgery, care needs to be taken. If your original problem was due to a stretch or tear from earrings, wearing heavy earrings especially for long periods of time can cause this to happen again.