

# Your child's surgery to correct prominent ears (pinnaplasty)

**This leaflet is about your child's surgery to correct prominent ears (a pinnaplasty). It explains what you should do before your child's procedure, on the day of the procedure and when you return home.**

## Your child's condition and procedure

### **Why does my child need surgery to correct their prominent ears?**

Your child is having this procedure because:

- their ears stick out (protrude) from the side of the head
- they would like to improve the appearance of their ears

Having ears that are prominent or uneven can cause emotional distress in children. You and your child have decided that this issue is having a negative effect on their life.

Surgery can help your child's self-confidence by improving the position, size and shape of their ears. The aim of the procedure is to mould the ears back towards the head in a more natural shape and position using internal stitches.

### **Are there any other treatment options to this procedure?**

The only way that we can correct prominent ears is by doing an operation. The procedure is intended to improve the appearance of your child's ears. It is your and your child's decision to have this type of treatment.

A pinnaplasty procedure is not suitable for younger children. This is because their ears are still growing and the tissue inside the ear (cartilage) is too soft to hold the stitches. We usually do the procedure when children are aged 8 or older. Their ears are then nearly fully developed.

## Before your child's procedure

### **What needs to happen before my child's procedure?**

We need to see your child at a pre-admission clinic. This clinic may take place face to face or online. We make sure that your child is ready for an anaesthetic, which is a medicine to make them sleep during the procedure, and surgery.

After the pre-admission clinic, our admissions team contacts you by letter, text message or phone. We offer you a date for your child's procedure.

Your child should not eat for 6 hours before the procedure. They can drink water until they arrive at the Evelina London children's day surgery unit. We give you more guidance about this (fasting instructions).

## **Do I need to get pain medicine ready for my child?**

Please make sure that you have a week's supply of paracetamol (a painkiller) and ibuprofen (an anti-inflammatory medicine) at home before the procedure. We do not routinely give these medicines to take home for your child after day surgery.

You can buy paracetamol and ibuprofen from a pharmacy, supermarket or shop. Paracetamol for children may also be called Calpol<sup>®</sup>. Ibuprofen for children may also be called Calprofen<sup>®</sup> or Nurofen<sup>®</sup>. You need the type of medicine that you would give your child if they were unwell with a cold or ear ache. If your child cannot take paracetamol or ibuprofen for any reason, please speak to their healthcare team about other options.

## **On the day of the procedure**

### **When you arrive at the children's day surgery unit**

We give you a time to arrive at the Evelina London children's day surgery unit. It is important that you arrive at the correct time and have followed the fasting instructions for your child. If you arrive late or have not followed the fasting instructions, we may not be able to do the procedure.

You and your child meet the surgical and anaesthetic teams on the admissions ward before the procedure. We confirm that you have given your permission (consent) for the procedure. You can ask us any questions that you may have.

### **During the procedure**

We give your child a general anaesthetic. This is a medicine that makes your child sleep and stops them feeling any pain during the procedure. You can stay with your child until they are asleep. Please see our separate leaflet called "Your child's general anaesthetic" for details.

When your child is asleep, the surgeon makes a small cut behind each ear. This exposes the thick tissue (cartilage) inside the ear. The surgeon then reshapes, folds or removes some of the cartilage to make your child's ears lie closer to the head. Finally, they put stitches at the back of the ears to hold them in their new position. The procedure takes up to 2 hours.

### **Are there any risks to my child's procedure?**

Every procedure has some risks of complications. To reduce these risks, we make sure that your child is well at the time of the procedure. We talk to you about the risks in the clinic and before the procedure when we confirm that we have your consent.

The specific risks of a pinnaplasty are:

- an infection where the cut was made that needs to be treated with antibiotics
- bleeding (we put a head bandage on your child to prevent this)
- a blood clot in the skin of the ear
- swelling (inflammation) of the ear cartilage
- loss (necrosis) of skin or cartilage inside the ear (this is rare)
- scarring (the small scar behind each ear after the procedure usually fades well, but in rare cases may become red and lumpy)
- stiff ears (it can take several months for them to become flexible again)
- numbness or tingling in the ears for a few weeks
- the ears no longer looking evenly shaped (symmetrical) or starting to stick out again (your child may then need another procedure to correct this)

## After your child's procedure

### **How will my child look and feel after their procedure?**

Your child may feel drowsy after their surgery and sleep for a while. They may be restless (agitated) and upset for up to an hour after waking up from the procedure. Some children may have pain and feel or be sick (vomit), but this is not common.

During the procedure, we may give your child painkillers, fluids, anti-sickness medicines and a local anaesthetic. The local anaesthetic is medicine that makes the area around the wound numb.

After the procedure, we put a bandage around your child's head. This helps the ears to heal in their new position and protect them from infection.

Your child's ears may feel sore and tender at first. It is common to have slight bruising around the ears. The procedure leaves a small curved scar behind each ear that fades with time and usually heals well.

### **Will my child be in pain after their procedure?**

Your child usually has a local anaesthetic medicine during their procedure. This medicine gives them pain relief for several hours after they wake up.

When your child is awake, we may give them paracetamol, ibuprofen or both medicines. You can continue to give your child these medicines as needed when they are at home. The nurses can guide you when the next amount (dose) of pain medicine is due.

### **When can my child eat and drink after their procedure?**

Your child should be able to eat and drink as usual within 1 to 2 hours of the procedure.

### **Do we see the surgeon after my child's procedure?**

Yes, the surgeon comes to check your child after their procedure. They update you about the surgery and answer any questions that you may have.

### **When can my child go home?**

Your child can go home on the same day as their procedure when they:

- feel comfortable
- can manage (tolerate) their usual food and drink
- are not feeling sick (nausea) or being sick (vomiting)
- are behaving as they usually do

Please supervise your child carefully on the journey home.

## After you go home

### **How do I care for my child's wound after their procedure?**

After the procedure, the surgeon or a member of their team gives you specific instructions about your child's wound and head bandage. They explain how to look after your child's wound while it heals and what follow-up care you can expect.

Your child usually needs to wear the head bandage for 7 to 10 days. It is important to:

- keep the head bandage as clean and dry as possible
- discourage your child from scratching the wound under the bandage

You need to bring your child to a dressing clinic 7 to 10 days after their procedure. We can then check if the wound is healing well.

Unless we tell you otherwise, please replace the head bandage if it falls off within the first 5 days of the procedure. You can gently put:

- gauze pads (absorbent pads for dressing wounds) on top of your child's ears
- a crepe bandage (a woven, elasticated bandage) around their head

If you are concerned or unsure what to do, contact the children's (paediatric) plastic surgery clinical nurse specialist from Monday to Friday, 9am to 5pm. You can find the contact details at the end of this leaflet. Outside of working hours, you need to go to your nearest emergency department (A&E) for the bandage to be replaced.

If the head bandage falls off after 5 days and the wound seems to be healing well, it does not usually need replacing. However, your child needs to wear a soft headband at night. Please contact the paediatric plastic surgery clinical nurse specialist if you have any concerns.

Your child's stitches are dissolvable and do not need to be removed. When the bandage is removed, your child needs to wear a soft headband at night for 6 to 8 weeks after the procedure. This is to avoid damaging the ears while sleeping.

It is important that the headband is not too tight to avoid extra pressure on the ears. You can use extra pillows to give your child comfort and help them sleep more upright.

### **How can I manage my child's pain after their procedure?**

If your child appears to be in any pain at home, we recommend giving them paracetamol and ibuprofen. Please remember to buy these medicines before the day of your child's procedure. It is also important to make sure that your child drinks plenty of fluids.

It is safe to give the 2 medicines at the same time, ideally with food. This is easier to plan and the medicines work in different ways. You can give your child:

- 1 recommended amount (dose) of paracetamol every 4 to 6 hours and no more than 4 doses in 24 hours
- 1 dose of ibuprofen every 6 to 8 hours and no more than 3 doses in 24 hours

You may find the following chart helpful to keep track of your child's medicines.

## Home medicine chart for parents

Medicine	Time to give	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Paracetamol								
Ibuprofen								

### When can my child return to their usual activities?

Your child can only have their hair washed when the head bandage has been removed. We see them in a dressing clinic 7 to 10 days after the procedure. Your child can then usually return to school.

It is best for your child to avoid:

- swimming for 6 weeks after the procedure
- contact sports or rough play for 3 months after the procedure
- rubbing their ears with a towel after a hair wash until they have seen a consultant for a review in the clinic

### Do I need to look for any symptoms after my child's procedure?

Contact a GP or the plastic surgery team if you feel that your child is unwell, or you notice:

- bleeding
- signs of infection, such as pain, severe swelling, hardening or thickening of the skin, redness that spreads on the skin, a bad smell from the wound and leaking yellow-green liquid called pus or watery fluid
- a high temperature (fever)
- your child is not eating or drinking well

On white skin, the area around the wound can appear red if it is infected. On brown or black skin, the area can appear red or purple but it may be more difficult to notice the redness. An infected wound site may feel warm or hot to touch on any skin colour.

If you are very concerned or notice these symptoms outside working hours (Monday to Friday, 9am to 5pm), call 999 or go to A&E.

## Do you see my child again after their procedure?

We may give you a date for a follow-up appointment while you are still in the children's day surgery unit. It is most likely that you will get a phone call from our team in the next few days.

### Contact us

If you **cannot keep your appointment**, contact our admissions team, **phone** 020 7188 9098, **email** [gst-tr.paediatricadmissions@nhs.net](mailto:gst-tr.paediatricadmissions@nhs.net)

If your child has a **cough, cold or high temperature** in the 2 weeks before the procedure, contact our pre-assessment team, **phone** 020 7188 7188 extension 58209

If you have any **concerns during working hours (Monday to Friday, 9am to 5pm)** about your child's surgery, call the paediatric plastic surgery clinical nurse specialist, **phone** 07747 204 489

If you have any **concerns outside working hours (Monday to Friday, 5pm to 9am or at the weekend)** about your child's surgery, contact the on-call plastic surgery doctor through the main switchboard, **phone** 020 7188 7188 and ask for bleep 0155

If you have any **concerns from 24 hours after surgery** about your child's health, contact your child's specialist surgical team or GP surgery, or **phone** NHS 111

If you are concerned that your child is **seriously unwell** at any time, go to your nearest A&E or **phone** 999

## Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline, **phone** 020 7188 3003, Monday to Friday, 10am to 5pm **email** [letstalkmedicines@gstt.nhs.uk](mailto:letstalkmedicines@gstt.nhs.uk)

## Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS), **phone** 020 7188 8801 **email** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk). To make a complaint contact the resolution department **phone** 020 7188 3514 **email** [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)



Leaflet number: 5402/VER1

Date published: June 2023

Review date: June 2026

© 2023 Guy's and St Thomas' NHS Foundation Trust  
A list of sources is available on request