

# MATTHEW POTTER

## PINNAPLASTY

### Benefits

To improve the position of the ears to sit closer to the head and potentially improve symmetry. This can be achieved by increasing the fold in the cartilage or by a reduction of the bowl of the ear or both. This can be undertaken with a local or general anaesthetic and is usually a day case procedure.

### Risks

1. Infection
2. Scarring
3. Pain
4. Swelling
5. Further procedures
6. Recurrence of the asymmetry
7. Return to theatre
8. Bleeding
9. Suture failure and thus recurrence of the protrusion and asymmetry
10. Loss of part of the ear
11. Cauliflower ear
12. Asymmetry
13. Over done
14. Under done
15. A peaked or pointed ear

### The procedure

You will be admitted to the ward the day of your procedure where you will be seen by the anaesthetist (if a General anaesthetic) and Mr Potter. Your face will be marked and you will have the opportunity to discuss the operation further if needed.

The procedure takes approximately 1-2 hours.

All wounds are closed with dissolving sutures.

### Inpatient course

This is usually undertaken as a day case procedure. You are likely to be nursed on the ward after the operation and discharged when comfortable.

### Postoperative course

You will be discharged with oral pain relief which on average is only needed for two - four days.

Return to work depends on your individual recovery and the work you undertake.

The head is bandaged and covered in a balaclava that stays in place for a week. At that stage you will return to hospital for removal of the dressings and trimming of any sutures if needed. You are then to wear the balaclava at night when sleeping for 6 weeks. This is to avoid the ears from being bent over when turning the head at night.

### Post operative follow up

You will be reviewed at about 7 days within your original hospital where the wounds and operative sites are checked and sutures trimmed if needed.

Mr Potter will review you after three weeks to assess your progress and he will give you regular reviews until all has fully settled and healed.

### Do's and Don'ts

You should only return to driving when you have the strength to perform an emergency manoeuvre and when you can freely pain free turn the head and with good vision if wearing the balaclava.

You should avoid any future piercing to the upper part of the ear . If you do intend to have any further procedure undertaken to the ear we advise that you contact and discuss with us first.