



PERFUSION OF THE INNER EAR

Patients with Meniere's Disease, sudden nerve hearing loss, and other inner ear disorders can sometimes benefit from medications, such as steroids and aminoglycosides, the latter of which are antibiotics that also happen to have an effect on the inner ear.

Although these medications can be given by mouth or by injection, their side effects can be reduced by applying them directly to the inner ear by way of the eardrum. This can be performed by either making an incision through the eardrum or inserting a needle through the ear drum into the middle ear. Like children, sometimes a tube is placed in the eardrum incision in order to keep the hole open longer to allow repeated instillation of the medications.

This is one of the most minor operations performed on the ear and, therefore, has a very low chance of side effects. Nonetheless, complications can occur with any medical or surgical treatment and it is important that patients and their families have a good understanding of these so that they can weigh the pros and cons for themselves.

INFECTION – Infection can follow any operation. It is unusual following this operation and if it occurs, is treated with eardrops or oral antibiotics.

DIZZINESS – Many patients have instillation of drugs into the middle ear because of dizziness, and most will have their dizziness improved with this treatment. Only rarely might dizziness become worse after this treatment.

TINNITUS – Most patients undergoing this surgery have tinnitus (ear noise). Although tinnitus can sometimes improve after this operation, it is frequently unchanged and can rarely be worse.

HEARING LOSS – Many but not all patients undergoing this surgery have temporary hearing loss. Depending upon the severity of the disease, hearing after this procedure is typically better but could be the same or worse. Total hearing loss is a rare complication of any surgery or medication.

PERFORATION – Many times, a tube may be placed in the ear to intentionally keep the hole of the eardrum open because small incisions in the eardrum typically heal quickly. Rarely, a perforation may persist and could require patching or surgery. At other times, the patient and surgeon will want the perforation to persist and a small tube will be placed into the eardrum to try to keep the hole open.

FACIAL AND TASTE NERVES – Because the facial nerve that helps move the face and the taste nerve that goes to the tip of the tongue are not far from the eardrum, it is a rare possibility that any treatment around the ear could cause facial weakness or a change of taste. These types of problems rarely happen with minor operations and, when they do, are usually temporary.

I have read the above statements and I understand the risks, potential complications, alternatives and expectations of the surgery and I have discussed these with my surgeon.

PATIENT'S NAME _____ DATE _____

PATIENT'S SIGNATURE _____

DOCTOR'S SIGNATURE _____