



Choice Aesthetics

Split Earlobe Repair Patient Information Leaflet

This leaflet provides information for patients considering split earlobe repair. The leaflet goes through what the procedure involves, the potential risks and long-term consequences.

How do split earlobes occur?

Split ear lobes can occur either from the long-term use of heavy earrings or following injury if the lobe is torn by a pulled earring. In some cases, the ear lobe and the hole for the earring may just be elongated and there may not be a full length, complete tear of the lobe.

How is split earlobe repair performed?

Split earlobe repair is performed under local anaesthetic as a day case procedure so that you are able to go home shortly after the procedure. Each earlobe repair takes around 30 minutes to complete.

The split or elongated area of the lobe is marked out to be removed as a wedge. Local anaesthetic is injected into the ear lobe to numb the area and the earlobe will usually stay numb for around 3 to 4 hours following the injection. The split section of the lobe is carefully cut out as a thin wedge of tissue. The wound is cauterised to stop any bleeding and the two sides of the ear lobe are then brought together with stitches. Thin skin dressing strips are applied to the wound till the sutures are removed. The stitches will need to be removed at around 7 to 10 days in the dressing clinic.

What are the risks of split earlobe repair surgery?

Every surgical procedure has the potential for complications and these should be carefully considered before going ahead with surgery. Miss Tadiparthi will go through the potential risks of surgery during your consultation. The risks of repairing a split or elongated ear lobe include:

Permanent scarring

There will be a permanent straight-line scar in the earlobe following surgery.

Bleeding

There may be some slight oozing of blood from the wound but this usually stops with pressure over the wound.

Infection

Wound infection is uncommon but can be treated with antibiotics in the majority of cases.

Bruising, swelling and altered sensation

The ear lobes and the ears in general can be bruised or swollen or feel different after surgery but usually improves over a few weeks.

Poor healing

The wound may take longer to heal or separate due to delayed healing. This is seen more commonly in smokers or those with other significant medical conditions.

Poor scarring

The quality of the scarring varies with each individual's own healing ability. Scars often heal well but some patients are especially prone to poor scarring developing lumpy, painful and itchy scars called, 'hypertrophic' or 'keloid' scars. Further treatment may be needed with multiple regular steroid injections or silicone dressings if hypertrophic or keloid scarring develops. Any further treatment for poor scarring will be at extra cost to the patient.

Indented scar

Occasionally, there may be a slight indentation in the lobe where the two sides of the ear lobe come together as scar tissue forms.

Recurrence

The scar is not as strong as normal skin and so piercing the ear lobes and the use of heavy earrings again can lead to recurrence of the split ear lobes. Following surgery, ear lobes should not be pierced and earrings should not be worn for at least 3 to 6 months. If the earlobe does tear once again, the surgery can be repeated, again under local anaesthetic, as a day case procedure.

Asymmetry

There may be slight differences in the appearance of the ear lobes or position or length of the scarring following surgery. These differences may be due to pre-existing asymmetries such as the shape, location, severity or length of the earlobe tear on each side.

Stitch extrusion

Deep sutures that hold the wound may be recognised as foreign material by the body and occasionally work themselves outside the wound. These sutures can be simply be removed later on as a minor procedure in clinic.

Allergic reaction

You may develop an allergic reaction to either the skin cleaning solution used, dressings applied to the wounds or the stitches. You may notice a rash, itching and swelling or occasionally, ulcers with raw skin. Further treatment may be needed if you develop such allergic reactions.

What is the recovery and post-operative care after surgery?

- You will be allowed home shortly after the surgery.
- It should be possible for you to return to work the next day.
- The stitches used in the operation are usually removed at 7 to 10 days in the dressing clinic. The dressing applied during your surgery should be kept on till you are seen in the dressing clinic. We advise that you shower from the neck down and keep the area dry in order to keep the dressings on. The wound will require a dressing to remain in place for approximately 2 weeks.
- Usually by 2 weeks, the wounds would have healed. The scars should be with massaged ideally twice daily with a simple aqueous moisturising cream (e.g. E45) or bio oil.
- Swimming and heavy cardiovascular exercise e.g. exercise classes, gym or jogging should be avoided for 3 weeks as it can lead to wound separation or wound infection. Walking or other gentle exercise is fine from the day after surgery.
- To ensure good healing, we recommend that you eat a healthy diet and if you usually smoke, please avoid smoking for at least 6 weeks before and after surgery.

What follow up will I have after surgery?

- At approximately 7 to 10 days after your surgery, you will be seen in the hospital dressing clinic to check your wounds and remove the sutures.
- You will be seen in the clinic by, Miss Tadiparthi at 4 to 6 weeks after the operation to check on your progress and then again at 3 to 6 months following surgery.