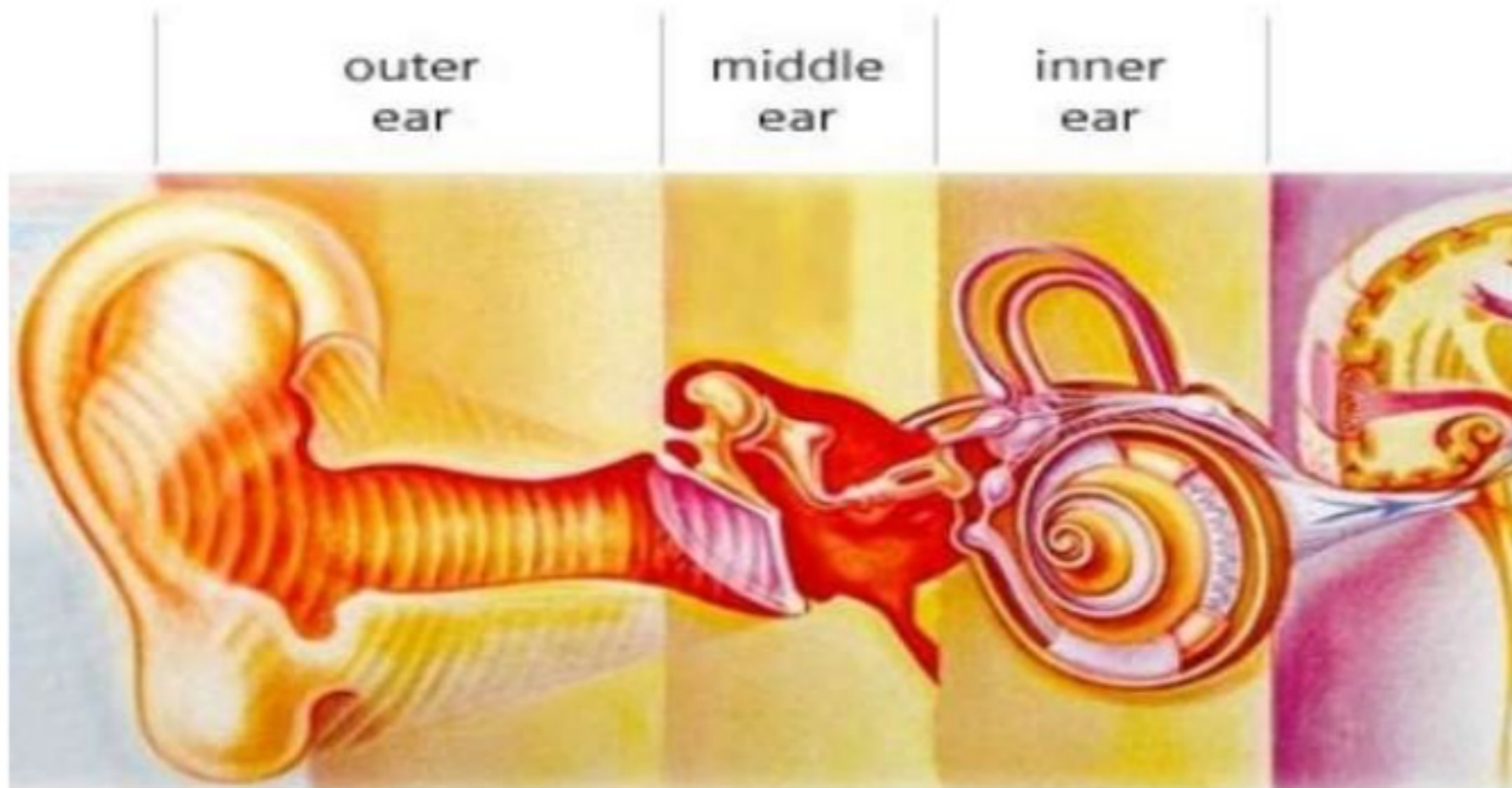


CONGENITAL DEFORMITIES OF EAR

PREPARED BY
Dr.JUSTIN JEYA AMUTHA

Anatomy

Three parts the ear



CONGENITAL

Bat ear

Abnormal protruding

Pinna without landmarks

Poorly formed antihelix and scapha

Can be corrected surgically

After 6 years of age



Pre auricular appendages

Skin
covered
tags

May
contain
cartilage

Removed
surgically



Pre auricular sinus/pits

Root of the helix

Incomplete fusion of tubercles

Repeated infection

Abscess may also form

Surgical excision of the entire track



Preauricular Sinus

Anotia

Absence
of pinna

First arch
syndrome



Microtia

Major developmental anomaly

Associated with other deformities

Unilateral or bilateral

Hearing loss



Microtia

Degrees of microtia



Grade 1

Small but almost normal



Grade 2

Some recognizable anatomy



Grade 3

Small rudiment of soft tissue and no ear canal



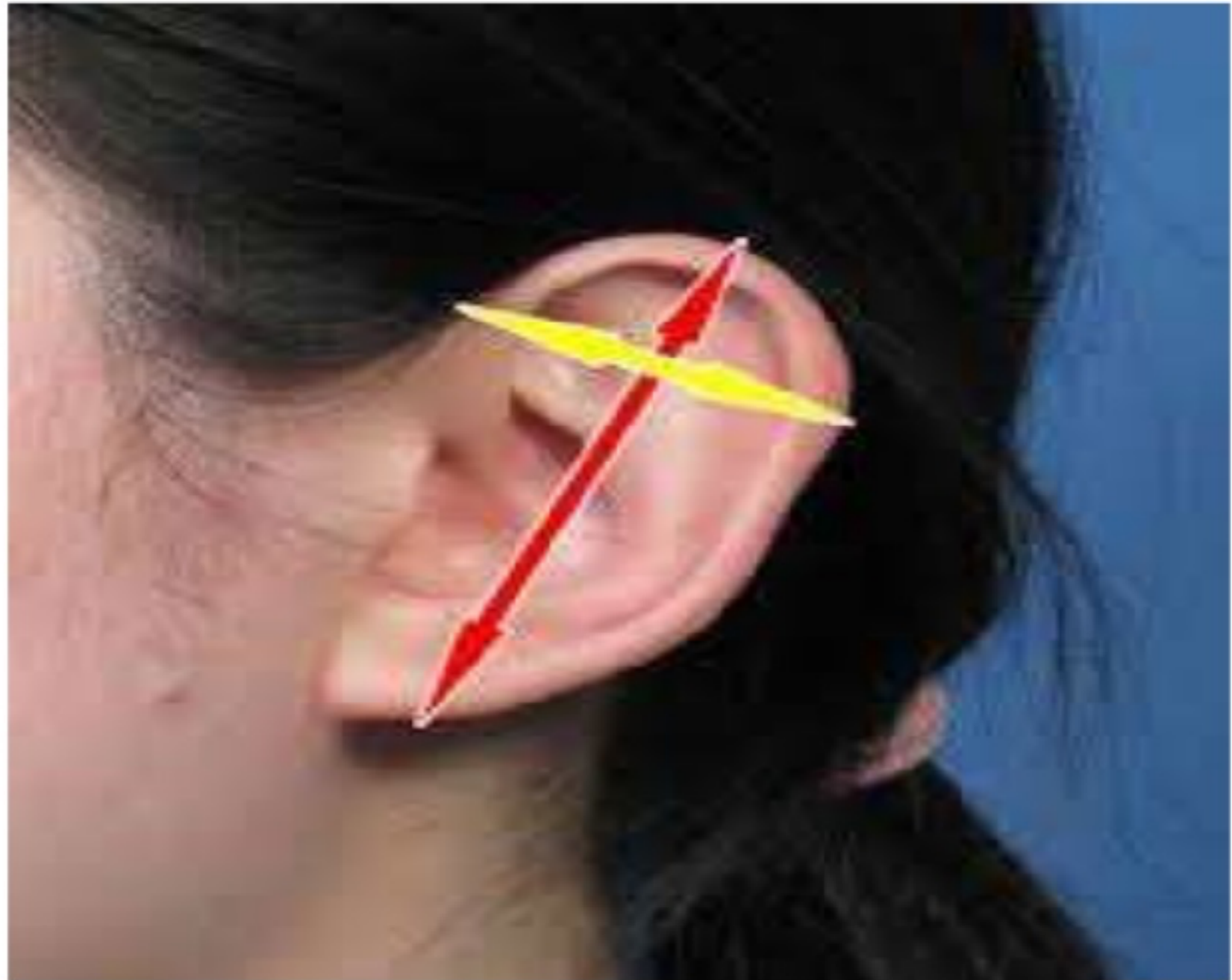
Grade 4

No external ear and no ear canal

Macrotia

Excessivel
y large
pinna

Can be
corrected
surgically



CONSTRICTED EARS (LOP EAR)



CRYPTOTOTIA



TRAUMATIC

Laceration

Sharpe
trauma

Many
types

Chances
of
avascular
necrosis if
perichondri
um is lost

Immediate
repair

Laceration of Pinna



Avulsion

If attached
repair
immediately

Reimplantati
on can be
done by
microvascula
r techniques

Skin can be
removed and
the pinna
implanted
under the
postauricular
skin for later
implantation



Frost bite

Rewarm with
moist cotton
pledgets

Silver nitrate for
superficial
infection

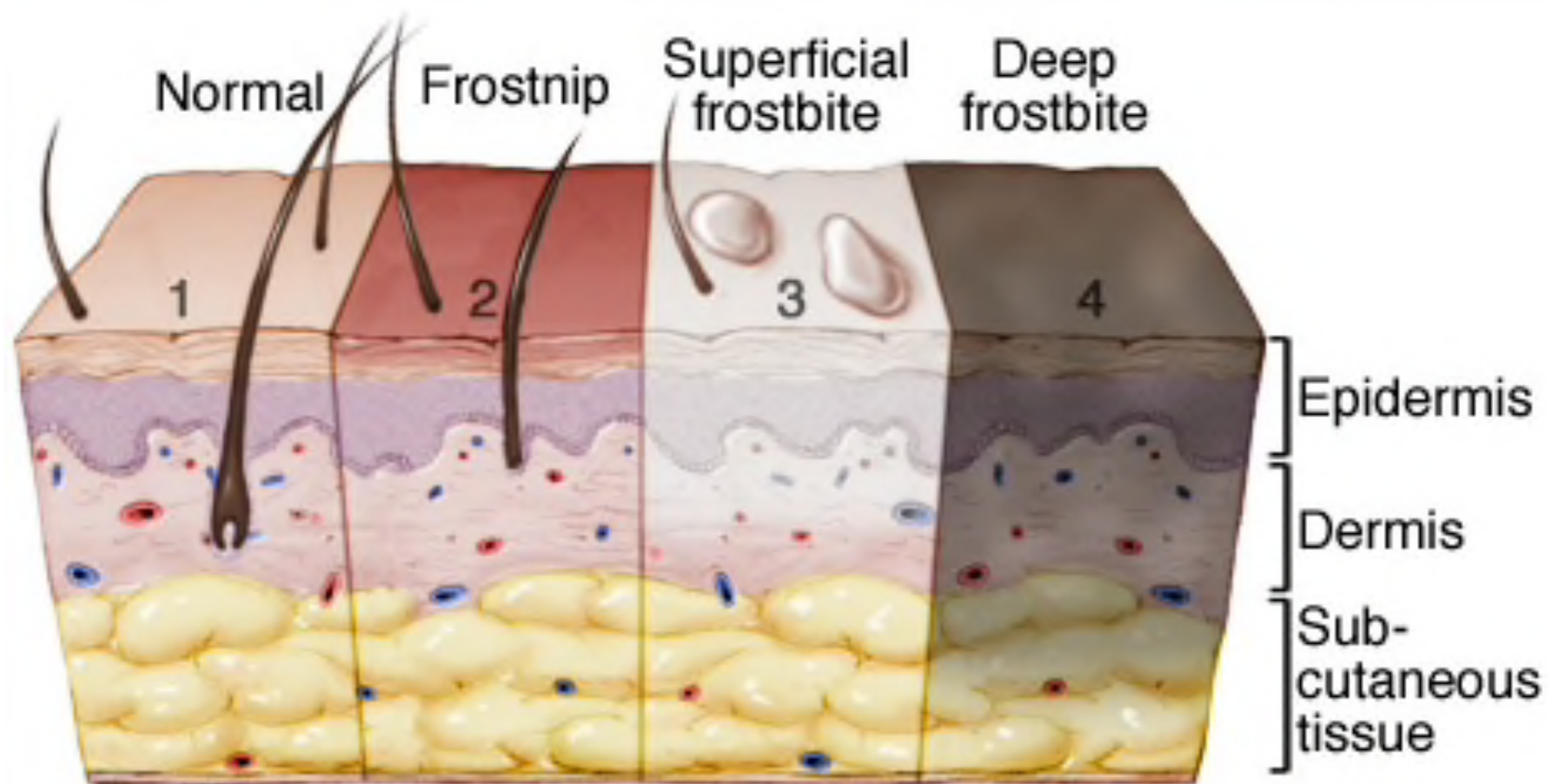
Systemic
antibiotics for
deep infection

Analgesics for
pain

Don't rupture
the bullae

Delayed
Surgical
debridement





Heamatoma

Blunt
shearing
force

Boxers,
wrestlers,
sports
injuries

Collection of
blood
between
perichondriu
m and
cartilage

Early
Incision and



Cauliflower ear

Consequences of non drainage or delayed drainage of hematoma
a



INFLAMMATORY

Perichondritis

Secondary infection

- Trauma
- Infection
- Pseudomonas

Red, hot, painful pinna

Abscess formation may occur

Systemic antibiotics

I & D of abscess



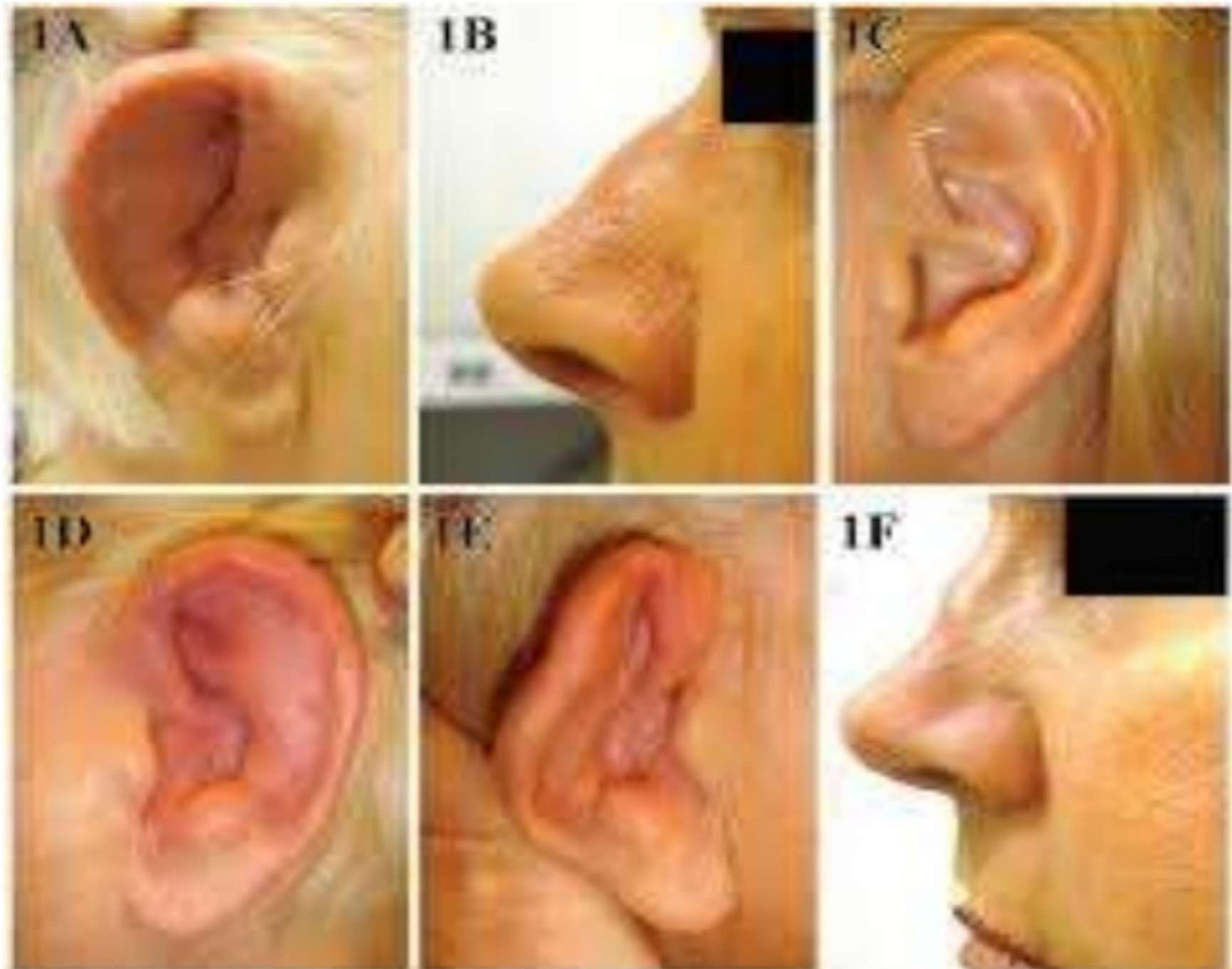
Relapsing perichondritis

Autoimmune disorder

Any cartilage can be involved

Tender & swollen cartilage

Systemic steroids



Chondrodermatitis nodularis chronica helicis

Small,
painfull
nodules
along the
free border
of helix

Old age

Surgical
excision



BENIGN TUMORS

Hemangioma

Benign
tumor of the
vessels

Detected in
childhood

Bleeds
frequently

Get infected

Surgical
excision

Local
injections of
sclerosing



Dermoid cyst

Developmental cysts

Surgical excision



Sebaceous cyst

Cysts of sebaceous glands

Contains cheesy material

Surgical excision



MALIGNANT TUMORS

SCC

Arising
from
squamous
epithelium

Malignant

Lymph
nodes
involvement

Surgical
excision

