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PATIENT INFORMATION ON EAR TUBES

What are ear tubes?

Ear tubes, also known as tympanostomy tubes or pressure-equalization (PE) tubes, are small plastic cylinders that are designed for placement in the eardrum. The tubes have a small hole in the middle that allows fluid that is trapped in the middle ear to escape and also allows air to pass into the middle ear. The purpose of the tubes is to reduce the number of ear infections that a patient has and to relieve the hearing loss that is associated with having fluid trapped behind the eardrum. Ear tubes do not cause hearing loss or any significant damage to the eardrum.

How are ear tubes placed?

In children, ear tubes are usually placed in the operating room under general anesthesia. The ear surgeon uses a microscope and makes a small incision in the eardrum. Any fluid that is present behind the eardrum is then removed. The ear tube is then inserted into this hole and small ledges on the ear tube keep it in place. The procedure takes less than twenty minutes for both ears. Recovery from anesthesia usually takes less than one hour and the child is ready to go home. The child does not have to stay overnight in the hospital. In adults, ear tubes can be placed in the medical office with topical anesthesia.

What are the benefits of placing ear tubes?

Ear tubes decrease the frequency of ear infections in patients who are having frequent ear infections. Also, patients with chronic ear fluid and hearing loss will have improvement of their hearing when the fluid is removed. This is usually noticeable soon after the tubes are placed.

What are the risks of placing ear tubes?

Ear tubes are very safe. There is a small chance of having ear drainage after tubes are placed. This can usually be treated with antibiotic ear drops. Rarely, a hole may be left in the eardrum after the tubes come out. The hole usually heals by itself but an additional surgery may be necessary in some cases.



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What should I expect after ear tube placement?

Children recover quickly after ear tubes and are often back to normal within hours. Sometimes children have nausea after anesthesia so it is best to start their diet with clear liquids (such as apple juice, water, or Jello) and let them eat regular food when they are hungry. There will be cotton balls in the ears right after surgery because there may be some pink fluid draining from the ears for a few days. The cotton balls can be changed as needed until the drainage subsides. Your doctor may prescribe antibiotic eardrops to be given for 5 days after surgery. To minimize discomfort to your child, the drops should be warmed to body temperature and given as directed. If your child is irritable or has fever then acetaminophen or ibuprofen can be given according to the instructions on the bottle.

What about exposure to water?

Water from a swimming pool or a bathtub will usually not cause any problems with the tubes. Earplugs are not needed unless there is diving into deep water or exposure to lake water.

How do the ear tubes come out?

Ear tubes do not need to be removed. The eardrum will push the ear tube out naturally in about six to twelve months. Sometimes the ear tube will lay in the ear canal or it may fall out completely. Children often outgrow their ear infections by the time the ear tubes come out.

When should I call my ear, nose, and throat doctor?

If the ear drainage does not subside after 3 days then you should call your doctor's office during regular office hours. Likewise, if the ear drainage starts again in the months following surgery then you should call during regular office hours. If your child appears dehydrated or has continuing nausea and vomiting after surgery then call your doctor immediately.