Surgery to Treat Hearing Loss

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En Español (Spanish Version)

In some cases, surgery may be recommended to help improve hearing loss.

Types of surgery include:

**Stapedectomy** — This is a microsurgical procedure to treat otosclerosis in which the stapes bone is removed and replaced with a prosthesis. Hearing may be better right away, but some bleeding behind the eardrum may keep hearing reduced. Very significant improvement in hearing should occur after 10 days to two weeks. Complications include severe hearing loss, facial nerve weakness, dizziness, infection, and the risk that the procedure may not be helpful.

**Tympanoplasty** — A graft of ear tissue is made through microsurgery to close a perforation (hole) in the eardrum. This is done to restore the middle ear hearing mechanism. It takes several weeks after surgery to determine if the procedure was a success. Complete recovery takes about four weeks. The hearing will improve, and when your doctor looks in the ear canal, he or she will see a healed eardrum. Complications include facial nerve weakness, dizziness, infection, and a recurrence of the perforation.

**Myringotomy and tubes** (also called tympanostomy and tubes) — A small incision is made in the eardrum so that fluid (blood, pus, and/or water) can be drained from the middle ear. A tube is often inserted to maintain drainage. This procedure is used if there is still fluid in the ear from an ear infection or allergy after three months. It is most often performed in children but sometimes in adults. Complete healing without complications should occur within four weeks. If an ear tube is inserted, it should fall out within 6-12 months. In some cases, surgery to remove the ear tube may be necessary.

Surgery may also be used to remove tumors in the ear that cause hearing loss.

**REFERENCES:**


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