SPLIT EAR LOBE REPAIR

Background - Split Earlobes
Mr Banwell, Consultant Cosmetic Surgeon is a specialist in repair of split ear lobes in Sussex, Kent, Surrey and London.

The earlobes are appendages of the ears made of soft skin and a small amount of fatty tissue. When studying the earlobe appearance and anatomy, one is often surprised about the large variation in size, form and shape. Aside from being important for a normal appearance of the ears, the earlobes serve women and men as popular locations for jewelry. Often, the earlobes are pierced to fit various forms of ear ornaments ranging from little studs to larger and heavier items.

How Do Earlobe Tears Occur?
Excessive weight or trauma can easily overcome the strength of the earlobe tissues leading to a tear in the gentle earlobe tissues. This split may be unattractive and renders the earlobe unusable for most jewelry. Sometimes, clip-on earrings can still be fitted and are used to camouflage the earlobe tear.

How Can Split Earlobes Be Corrected?
We have seen creative patients using transparent tape to temporarily repair their torn lobe. Although a resourceful idea, skin reaction may develop making this habit obsolete in the long run.

Most torn earlobes can be effectively and safely corrected by Mr Banwell using delicate surgical repair techniques. The procedure is routinely performed in the outpatient department under local anaesthesia with an optional sedative. After planning and marking, a small amount of local anaesthetic agent (lignocaine) numbing solution is deposited. The procedure itself is performed without any discomfort. In order to rebuild the earlobe, the healed and scarred aspects of the tear require removal. Repair is then performed in a straight line or in a zigzag. The most appropriate technique will be discussed with the patient and depend on the specific location of injury and anatomy of the earlobe. Fine suture threads are used which support the repair and minimise scarring. Mr Banwell tends to use brown micropore tape to cover the wounds until the sutures are removed at 1 week.The healed earlobe has usually a barely visible pencil-fine scar line without aesthetic limitations.

Can The Ear Be Pierced Again?
Yes, but Mr banwell asks his patients to wait for a minimum of 6 months before a stud can be placed. Now it is important to prevent recurrent earlobe damage. Therefore, be careful with larger ear jewelry and loops around children. Small studs are relatively safe, heavy ear rings should be avoided.

Earlobe Slit (Enlarged Piercing Hole)
An incomplete tear in the earlobe usually starts at the original piercing site and continues downward for some degree. The result is an earlobe hole too large to hold ear studs. Closure of the enlarged slit-like hole can be performed in the outpatients department as mentioned above (under a local anaesthetic). A new piercing usually has to be performed but has to wait for approximately 6 months.

Earlobe Reduction
Earlobes may be large from birth but commonly get bigger with age. A large earlobe may require substantial ear jewelry for appropriate balance; small studs may appear "lost" within the space of a fleshy earlobe. Large earlobes can be sagging and hang down too far which may benefit from a decrease of the hanging curvature. In other instances, the earlobe is rather fleshy and elongated requiring a decrease of the overall length. An earlobe reduction is performed in the office under local anaesthesia with the option of sedation.

Earlobe Reconstruction (Ear Lobe Repair)
A variety of problems may require reconstructive surgery of the earlobes. Earlobe abnormalities may result from hereditary abnormalities, traumatic events, surgical procedures (i.e., for skin cancer treatment) or earlobe changes due to body art. The reconstructive approaches to most of these problems differ and depend on the specific needs of the patient. Often, a creative and artistic eye is helpful in planning these delicate earlobe procedures.

Important Notice
Mr Banwell strongly advises you stop smoking prior to surgery as this can affect the outcome of surgery and increase complication rates. Nutritional supplements, anticoagulant medication and blood thinners (eg. aspirin and brufen) all increase the risk of bleeding and should be stopped prior to surgery unless otherwise instructed.

T. 01342 330302
help@paulebanwell.com www.paulebanwell.com

Paul E Banwell FRCS(Plast)
Consultant Plastic, Reconstructive & Cosmetic Surgeon