Risks and Complications of Myringoplasty, Tympanoplasty, Mastoid Surgery, And Other Operations for Correction of Chronic ear Infections.

(Operations to eliminate middle ear or mastoid infection, to repair the eardrum or the sound transmission mechanism).

**Ear Infection**
Ear infection with drainage, swelling, and pain may persist after surgery or, rarely, may develop after surgery because of poor healing of the ear tissue. If this is the case, additional surgery may be necessary to control the infection.

**Loss of Hearing**
Further permanent impairment of hearing develops in 3% of patients because of problems in the healing process. In 2% this loss of hearing may be severe or total in the ear that was operated on. Nothing further can be done in these instances. When a two-stage operation is necessary, the hearing is usually worse after the first operation.

**Tinnitus**
Should the hearing be worse after surgery, tinnitus (head noises) likewise may be more pronounced.

**Dizziness**
Dizziness may occur immediately after surgery because of irritation of the inner ear structures. Some unsteadiness may persist for 1 week postoperatively. Prolonged dizziness is rare, unless there was dizziness before surgery.

**Taste Disturbance and Mouth Dryness**
Taste disturbance and mouth dryness are common for a few weeks after surgery. In some patients, this disturbance is prolonged.

**Facial Paralysis**
A rare postoperative complication of ear surgery is temporary paralysis of one side of the face. This may occur as a result of an abnormality or a swelling of the nerve, and usually subsides spontaneously.

Very rarely, the nerve may be injured at the time of surgery, or it may be necessary to excise it to eradicate infection. When this happens, a skin sensation nerve is removed from the upper part of the neck to replace the facial nerve. Paralysis of the face under these circumstances lasts 6 months to 1 year, and there would be permanent residual weakness. Eye complication requiring treatment by a specialist could develop.

**Hematoma**
A hematoma (collection of blood) develops in a small percentage of cases, prolonging healing. Reoperation to remove to clot may be necessary if this complication occurs.

**General Anesthesia Complications**
Anesthetic complications are very rare, but can be serious. You may discuss these with the anesthesiologist if you desire.

**Complications Related to Mastoid Surgery**
A cerebrospinal fluid leak (leak of fluid surrounding the brain) is a very rare complication. Reoperation may be necessary to stop the leak. Intracranial (brain) complications, such as meningitis or brain abscess, or even paralysis were common in cases of chronic otitis media before the antibiotic era. Now these are extremely rare complications.