Postoperative Instructions

Labyrinthectomy

Oliver F. Adunka, MD, FACS
Professor and Division Director, Otology / Neurotology / Skull Base Surgery
915 Olentangy River Road, Columbus, OH 43212, Office: (614) 366-3687, Fax: (614) 366-4345, Email: oliver.adunka@osumc.edu

Leaving the Hospital

• You will receive a prescription for the following medications once you leave the hospital:
  - Pain medicines
  - Anti-nausea medicine (not always)
  - Antibiotic for 4-10 days.

• The bandage should be removed two days following surgery. Many patients will still be in the hospital at this point. Postoperative vertigo is expected in most patients and typically limits mobility and subsequently discharge from the hospital.

Home Care/In Hospital Care-The First Few Days

• First 24 hours after surgery:
  - Remove the cotton ball from the outermost part of the ear canal (if present).

• You may wash your hair 3 days after surgery.

• The incision behind the ear is typically covered with Steri-strips and these should be left in place. These will remain adherent for 10-12 days. No care is necessary.

• Do not blow your nose for 4 weeks after surgery. Sniffing is okay.

• You may fly 6 weeks following surgery.

• No vigorous physical activity, including sports, until seen for your post-operative visit. With exception of these restrictions, you may return to work or school as overall condition permits. After 3 weeks you may resume all activities, including sports and physical exercise.

• Despite the loss of hearing, you may hear a variety of noises in your ear such as cracking or popping. This is part of the normal healing process.

• Balance problems including true vertigo are very normal after this type of procedure. Proper early postoperative vestibular rehabilitation is key.

Home Care- After the First Few Days

• Pain should subside. Please continue taking Ibuprofen or Tylenol for relief of mild pain. It is normal for the top ½ of the ear to feel numb and this will take several months to return to normal.

• There may be change in taste (usually described as metallic) on one side of the tongue and this usually improves within several months.

• If you return for an office visit within 2-3 weeks, the Steri-strips will be removed in the office. If the appointment is later than this, you may remove the Steri-strips at home.

• All stitches are under the skin and will not need to be removed. After the Steri-strips are removed, the incision should be cleaned gently with peroxide once or twice daily until no creasing is noted. A thin layer of antibiotic ointment (Neosporin, Polysporin, Bacitracin, etc.) is helpful for 7 days after removal of Steri-strips.

• Unlike many other ear surgeries, it is not important to keep all water out of the ear since the surgery is performed from behind the ear without breaching the ear canal.

First Follow-up Appointment

• Call the office for a follow-up appointment at the time recommended (typically 2 weeks following surgery) by Dr. Adunka. Sometimes this appointment may be with your referring otolaryngologist, in which case, Dr. Adunka will send a letter detailing your surgery and recommended follow-up care before you see the physician.

Call office if:

• Increased pain not relieved by prescription medications.

• Large amounts of bleeding from the ear area.

• Pus/Foul smelling drainage from the ear.

• Redness in the ear area.

• Temperature over 100° on 2 consecutive readings.

• Severe dizziness.

Important Contact Information

The Ohio State University

• (614) 366-3931 or dania.ahmed@osumc.edu
  Dania Ahmed in Dr. Adunka’s office
  non emergent questions, scheduling

• (614) 366-3687 Hospital Operator
  after hours, ask for ENT resident

Nationwide Children's Hospital

• (614) 722-2000 Operator
  after hours questions, ask for ENT resident

• (614) 722-6547 ENT Nurse line

• (614) 722-4333 Emergency Department
  after hours emergency, only if no response from resident