

Prominent Ears

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Prominent ears take many forms, but most often are the result of one or both of two common deformities. A brief explanation of the anatomy of the ear is necessary to understand them.

The outer raised rim of the ear is known as the *helix*. Inside and parallel to the middle portion of the *helix* is a second raised line known as the *antihelix*. The upper portion of the *antihelix* splits into two, in the shape of a "Y." In the first deformity, the *antihelix* is not well formed – this fold is either missing or not very prominent. As a result, the rim of the ear stands out or is overly prominent, because it is not bent back by this fold.

The cup shaped center of the ear that seems to flow into the ear canal is known as the *concha*. The angle at which the *concha* meets the head behind it determines how much the central, main portion of the ear stands out from the head. If the angle is too great, the whole ear is prominent.

Although there have been many different operations developed over the years to treat prominent ears, most of them address one or both of these abnormalities. Either the angle that the ear meets the head is decreased, to bring the central part of the ear proper closer to the head, or the fold of the *antihelix* is recreated or enhanced to bend the rim of the ear into its proper position.

Most of the operations to improve the appearance of the ear are done through the back side of the ear, so that when the shape of the ear has been corrected, the scar is not noticeable unless one looks carefully for it.

Surgery to treat prominent ears is often performed on children. Usually the parents bring the child in right before the child starts school, to prevent their child from being teased by other children about his or her prominent ears. Sometimes older children are brought in because they are being teased.

Adults also have surgery for prominent ears. Most common are women and men, who have always worn their hair long, disguising their prominent ears, who now want to wear their hair short. Recently I performed this operation on a young woman who was about to undergo chemotherapy and expected to temporarily lose her hair. She came in to have her ears fixed so that she could wear a bandana instead of a warm wig.

For children, it is often possible to get their insurance company to pay the cost of this surgery. For adults, this is often considered to be a cosmetic procedure, and is paid for by the patient.

The best way to find out if the appearance of your child's or your ears can be improved is to make an appointment.

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