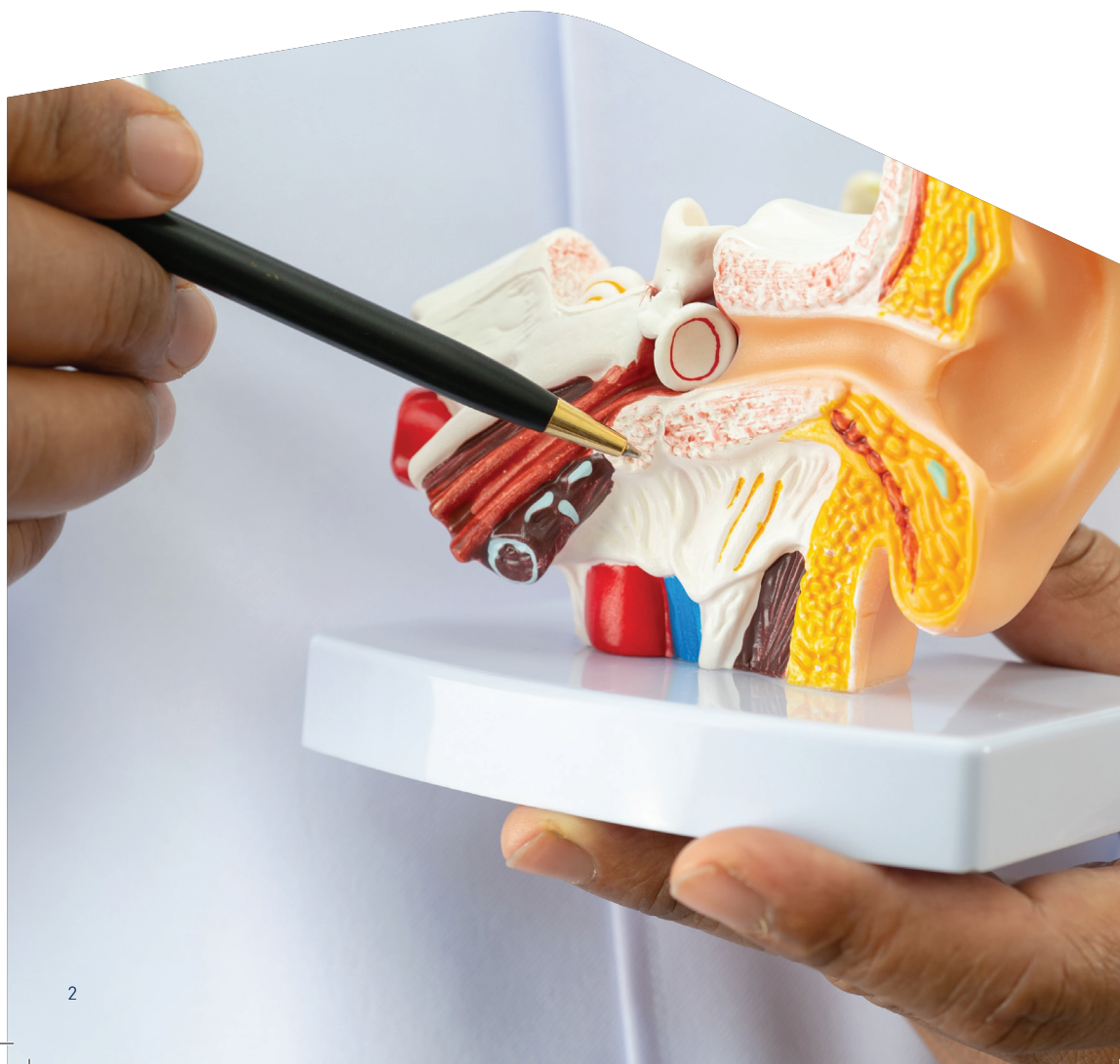


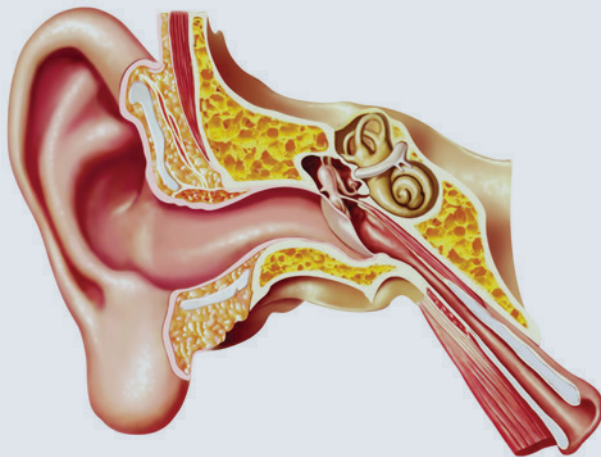
Cholesteatoma

The Department of Ear, Nose & Throat (ENT) - Head & Neck Surgery provides a wide range of surgical services for adult patients with ENT, head and neck diseases. Patients are referred from polyclinics, general practitioners, emergency services or transferred from other departments within the Ng Teng Fong General Hospital or other healthcare facilities, including nursing homes, community and other hospitals. Our team of highly-trained ENT-Head & Neck surgeons and allied healthcare professionals aim to provide the best possible care to our patients.



What is a cholesteatoma?

Our external ear produces new skin and ear wax that moves towards the opening of the ear canal to cleanse the ear. However, when the eardrum retracts or perforates, the process is interrupted. When the ear's skin grows inwards or when there's an abnormal accumulation of skin behind the eardrum, the sac of skin enlarges slowly and invades deeply. This is called cholesteatoma. Cholesteatoma should be treated because it can cause serious complications if left alone.



Anatomy of the ear



What are the complications of cholesteatoma?

The cholesteatoma can damage the ear structures when increased pressure is exerted on the surrounding vital structures. The delicate ossicles start to erode and cause significant hearing loss. Damage to the facial nerve may cause weakness in the face. Damage to the inner ear may cause vertigo and sensorineural hearing loss. Further erosion of the bone into the brain may cause meningitis or an abscess. Intermittent infection of the cholesteatoma can hasten its growth and destruction.

What are the treatment options?

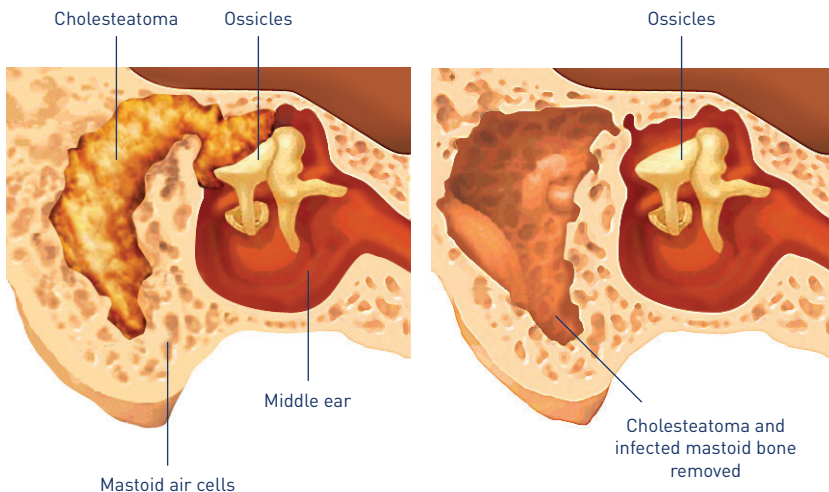
For most patients, the best treatment is surgery. The primary purpose of surgery is to remove the cholesteatoma and achieve a clean, dry and safe ear. Hearing preservation or restoration is the secondary goal.

Mastoidectomy

Mastoidectomy is a surgery where the cholesteatoma is removed together with part of the involved mastoid bone using a microscope and high-speed drills.

Mastoidectomy with ossicular chain reconstruction is an option that may be used when the ossicles have been eroded by the disease. Ossiculoplasty may be performed at the same time or six months after the mastoidectomy depending on the extent of the disease.

Mastoidectomy is generally performed with a mastoplasty so that the outer ear canal is surgically widened to facilitate future cleaning and monitoring.



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