

September 20-21, 2018  
Lisbon, PortugalJ Otol Rhinol 2018 Volume: 7  
DOI: 10.4172/2324-8785-C2-012

# BILATERAL MYRINGOPLASTY IN SINGLE SITTING: HOW I DO IT?

**S M Khorshed Alam Mazumder**

Holy Family Red Crescent Medical College, Bangladesh

**Background:** Myringoplasty is a common otologic procedure to successfully close the perforation of tympanic membrane in tubotympanic type of chronic suppurative otitis media (CSOM) in dry condition. Because of a theoretical risk of postoperative iatrogenic sensorineural deafness and pain both ears has induced reluctance of most otologists and it has been recommended for doing either ear in one setting and the second ear after a reasonable interval in cases of bilateral CSOM.

**Objectives:** To evaluate the advantageous results in simultaneous single sitting bilateral myringoplasty

**Patients & Methods:** From 2000 to 2017 I have done operations of 950 patients (1900 ears) using temporal fascial graft in underlay technique. I started practicing both ears in selected cases in single sitting. Taking temporal fascial graft from either side or diving to sufficient size for both sides, surgical trauma to one side is reduced to minimum extend and operation time for both ear and is less than an hour.

**Results & Observations:** After doing either ear in one sitting for more than ten years when the complication of surgery come to very acceptable level (1% graft failure, no hearing deterioration), operation time for one ear come down to 35-40 minutes. The procedure is cost effective and tolerable to motivated patients. Average follow up of these patients for six months showed a success. No patient had both ear failure and 12 patients had failure of either ear. Revision of these ears was subsequent success.

**Conclusion:** I recommend bilateral simultaneous myringoplasty in one sitting as a safe and effective with high success in compliant and motivated patients by efficient skilled and confident surgeons.

kmazumder58@gmail.com