Don’t Forget About the Ears

Infant Ear Molding

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“I never wear my hair up and get made fun of at school.”

“I’ve gotten in fights because of people teasing me”

“I’d like my ears fixed”
The Clinical Problem

- 20%-30% of all children born in the US have with some type of ear deformity
- Kids are being bullied AND unnecessary surgical procedures are being performed
Options

1. Live with it and embrace the unique ear

2. Operate on the ear around age 5

3. Infant Ear molding
A Morphometric Study of the Newborn Ear and an Analysis of Factors Related to Congenital Auricular Deformities

Methods:

• 5 hospitals in Pearl River delta
• 300 consecutive births at each hospital over a 1-2 month period

Results:

• 1500 newborns, 3000 ears examined within the first 7 days of life:
  * 1276 ears normal
  * 1724 ears with various deformations: 57.5% incidence

3000 ears examined at 30 days: 31.6% of the original 57.5% corrected leaving 39.3% uncorrected
External Ear Anatomy

- fossa triangularis
- superior crus
- inferior crus
- scapha
- helix
- antihelix
- tragus
- antitragus
- lobule
- concha
Common Congenital Deformities of the Ear
Definitions:

• **Malformation**: Missing elements of the ear

• **Deformation**: All parts present, abnormally shaped, folded
Treatable Ear Deformities

- Helical Rim
- Stahl’s
- Constricted
- Cryptotia
- Cup/Lop
- Mixed/Complex
Uncorrected Deformities
Traditional Treatment

- Surgical intervention
- Age 5 or above
- Involves incision, scoring and manipulation of cartilage, placement of sutures
- Dressing for 5-7 days
- Head wrap for protection at night for 4-5 weeks
- Avoidance of sports for 6 weeks
- EXPENSIVE AND NOT COVERED BY INSURANCE
- Scarring
The Solutions:
Ear Molding with InfantEar
What is InfantEar®?

A revolutionary, new pediatric (Class I) medical device that non-surgically corrects ear deformities in infancy, thus improving a patient’s appearance for a lifetime...
Scott P Bartlett, MD
TalexMedical FOUNDER
Former Chief, Division of Plastic Surgery
Children’s Hospital of Philadelphia
The Solutions:
Ear Molding with EarWell
Steve Bryd, M.D. – Plastic Surgeon
• Inventor - EarWell
• Dallas, TX
InfantEar (previously EarGear)
Do Deformed Ears Self-Correct?
70% Do Not Autocorrect
Nonsurgical Correction of Congenital Auricular Deformities

Matsuo K, Hayashi R, Kiyono M, Hirose YT, Netsu Y
Clinics in Plastic Surgery Volume 17, No 2, April 1990, p 383-395
(Japan)
Conclusions:

• “...We could not determine which specific deformed ears would retain the deformity permanently and which would correct themselves spontaneously. Therefore at this stage of our knowledge we carry out nonsurgical correction on all deformities that are significant and treatable”
2 WEEKS OF MOLDING CAN CHANGE A LIFE FOREVER…

Compliments of Dr Julio Guerra, MD
Key Benefits of Ear Molding

• Custom fit for each patient.
• Made of soft materials for increased comfort and safety.
• Simple, quick application
• Early treatment – only 2-3 weeks of molding is required if treatment initiated in the first few weeks of life.
• Prevents surgical intervention or potential bullying of a child living with a deformity.
• Results often exceed those seen with surgery.
How It Works: Step 1

Shave Hair / Clean & Dry Scalp
How It Works: Step 2
Position the Base Plate
How It Works: Step 3

Place 1-3 Conformers
How It Works: Step 4

Secure the Rim Piece
How It Works: Step 5
Apply Silicone Gel
How It Works: Step 6
Place Cap and Secure Beanie
Thank you!