

Split earlobes are a commonly seen problem due to the unsightly appearance in an area of the body which is always on display. A split earlobe diagnosis may also be attributed to earlobes which have not split but elongated over time. Split or elongated earlobes may be due to a variety of causes:

- Trauma;
- Prolonged use of heavy earrings;
- Following use of disc earrings and
- Genetically weak ear lobes.

Often, in cases where the use of heavy earrings has contributed to split or elongated ear lobes these individuals may have had a weak ear lobe prior to their use.

Common causes of trauma to the ear lobe include snagging earrings on others clothing as well as trauma through contact sports such as rugby or combat sports. Split earlobe surgery is a day case surgical procedure that we can offer at to repair a split or elongated ear lobe.

The procedure is primarily carried out to improve the cosmetic appearance of the area but on occasion it may be done for practical reasons where the hole is at risk of being continually snagged.

The procedure is performed by an experienced ENT or Plastic Surgeon

A repair for a split earlobe is performed by initially providing a local anaesthetic to the ear lobe. Once the area has been sufficiently numbed, the damaged, scar tissue will be carefully removed and the new ends will be stitched using dissolvable stitches.

Normally, a split ear lobe repair procedure is completed in approximately twenty to thirty minutes. You will be able to go home later on the same day as your surgery. Once the local anaesthetic has worn off there may be some minor discomfort for a number of days which can be managed with paracetamol. The dressings will be removed after one week at your review appointment with your specialist.

There will be a small scar present which will gradually remodel over a period of weeks or months.

Normally, your Consultant will recommend that you wait for six months after your repair surgery before considering re-piercing the earlobe and if this is performed it is recommended that the lobe is pierced in normal tissue rather than through the scar which is weaker and re-tear or elongate again.