

Blocked Ears

Patient information



Blocked Ears?

Dear patient,

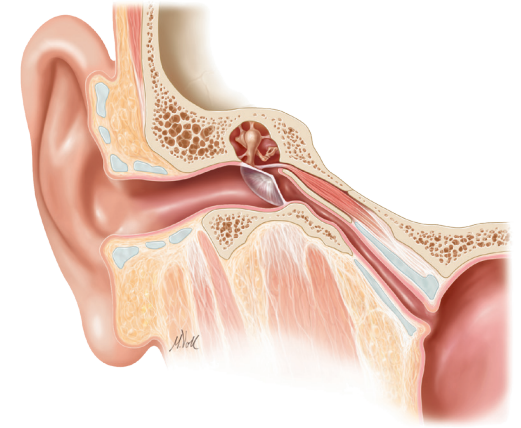
Everyone has experienced ear pressure – whether in a plane during take-off or on landing, going through a tunnel on the train or hiking through mountain passes. The problem is also familiar to divers.

Normally, this uncomfortable and sometimes even painful feeling quickly disappears – usually after swallowing or yawning. However, about one percent of adults suffer from Eustachian tube dysfunction, where symptoms persist or result in a permanent feeling of pressure or “muffled” hearing.

Persistent dysfunction needs to be treated

People with pressure imbalance disorder in the ear should consult a ear, nose and throat (ENT) doctor for advice. Your doctor will start by giving you a full ENT examination. The results of which will be used to decide on a suitable course of treatment.

In some cases, symptoms can be relieved by a procedure: balloon dilatation of the Eustachian tube with a TubaVent®-catheter. If this method is appropriate, your ENT consultant will refer you to a specialist clinic.

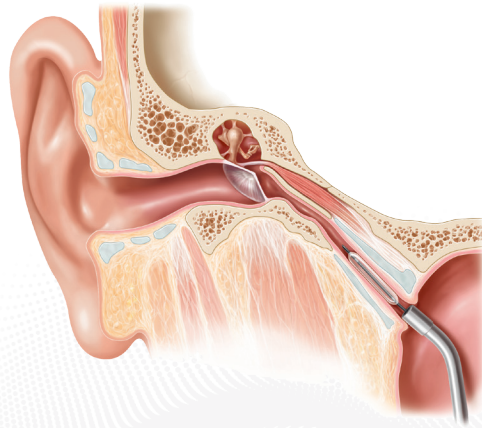


Location of the Eustachian tube

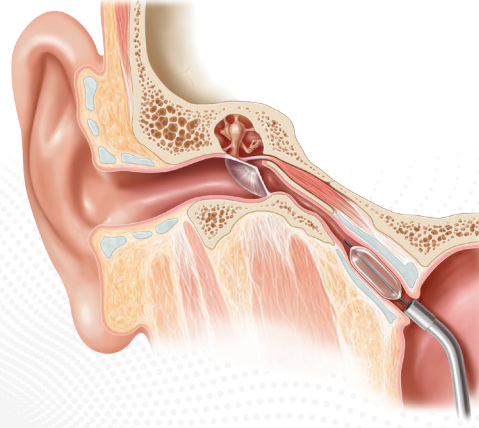
What is Eustachian tube dysfunction?

The Eustachian tube is a small, tube-like structure that links the nasopharyngeal cavity with the middle ear. It consists of an elongated part made of cartilage which opens into the nasopharyngeal cavity. The part near the eardrum is short and bony. Every time we swallow, this structure opens briefly before immediately closing again.

This acts to equalise pressure between the middle and the outer ear. When this happens, a “click” can usually be heard. If the Eustachian tube cannot open properly, the pressure cannot be equalised, resulting in an uncomfortable sensation such as ear pressure or “muffled” hearing.



TubaVent-catheter before inflation in the cartilaginous part of the Eustachian tube



The inflated TubaVent-catheter dilates constrictions in the cartilaginous part of the Eustachian tube

Eustachian tube dilatation with the TubaVent®-catheter: an innovative treatment

Balloon dilatation of the Eustachian tube is an established method for treating Eustachian tube dysfunction. Your ENT consultant will refer you to a specialist clinic for this minimally-invasive procedure. Under a short-term general anaesthetic, a balloon is used to dilate the patient's Eustachian tube:

to do so, the surgeon inserts a balloon catheter through the nose or mouth, into the cartilaginous part of the Eustachian tube. The balloon is then inflated to create 10 bars of pressure over a period of two minutes. The result is a dilatation of the constrictions in the tube. In most cases, dilation can restore proper tube function, enabling both normal air exchange and pressure equalisation.

Eustachian tube training for post-operative success



Please consult your physician before starting any after-care. After balloon dilatation we advise you to regularly train ventilating the Eustachian tube. The "Valsalva manoeuvre" is a suitable training method. Pinch your nostrils together then, keep your mouth shut while tensing your stomach muscles, breathe out as if you were blowing your nose.

This manoeuvre equalises pressure whilst opening the Eustachian tubes. We do not recommend starting tube training immediately after balloon dilatation.

For more information, please visit our website for patients at www.blocked-ears.com

SPIGGLE & THEIS Medizintechnik GmbH
Burghof 14 • 51491 Overath
Germany

Phone: +49 2206 9081 - 0
Fax: +49 2206 9081 - 13

www.spiggle-theis.com
service@spiggle-theis.com

A patient leaflet from

 **SPIGGLE & THEIS**
Medizintechnik