



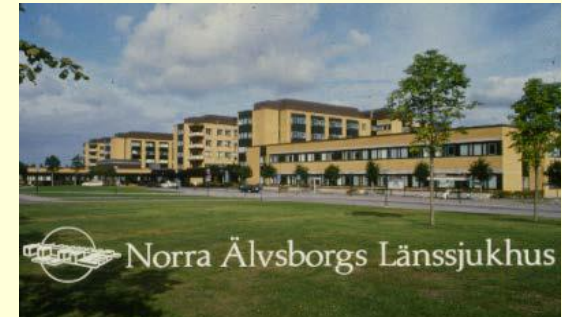
Myringoplasty

Patient satisfaction one year after surgery

The Swedish Quality Register for Otorhinolaryngology

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Background

The Swedish Quality Register for Otolaryngology was initiated 1997 and register the process and result of nine different diagnoses or surgical procedures of which myringoplasty is one. Myringoplasty as a surgical treatment to heal the tympanic membrane is performed to improve hearing and prevent ear infections.

In this study we evaluate patient satisfaction after surgery and relate this to healing of the tympanic membrane, postoperative complications and hearing results.

Materials and Methods

The Register comprises 5777 cases of myringoplasty for dry tympanic membrane perforations 2002-2012. The database includes all types of myringoplasty, including fat graft technique. 3091 patients answered a questionnaire approximately one year after surgery. To evaluate patient satisfaction after surgery we analysed the answers of the following question: " Are you satisfied or not with the result of the surgery?"

The question was answered with satisfied, dissatisfied or neither satisfied or dissatisfied.

At a outpatient clinic healing of the eardrum was controlled and complications as postoperative infection, tinnitus and chorda symptoms were registered.

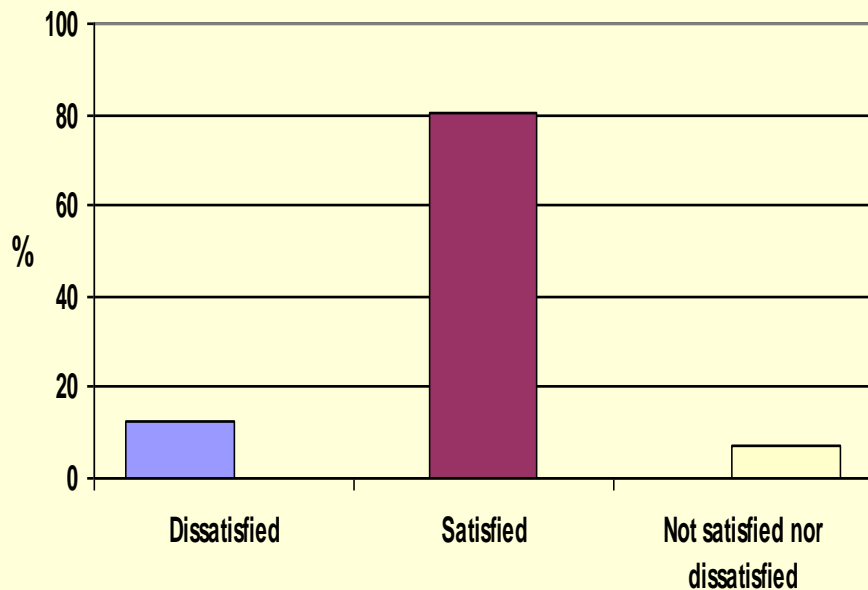
Audiometric data were obtained in 1160 patients and further analyses were made to correlate this to satisfaction after surgery.

Results

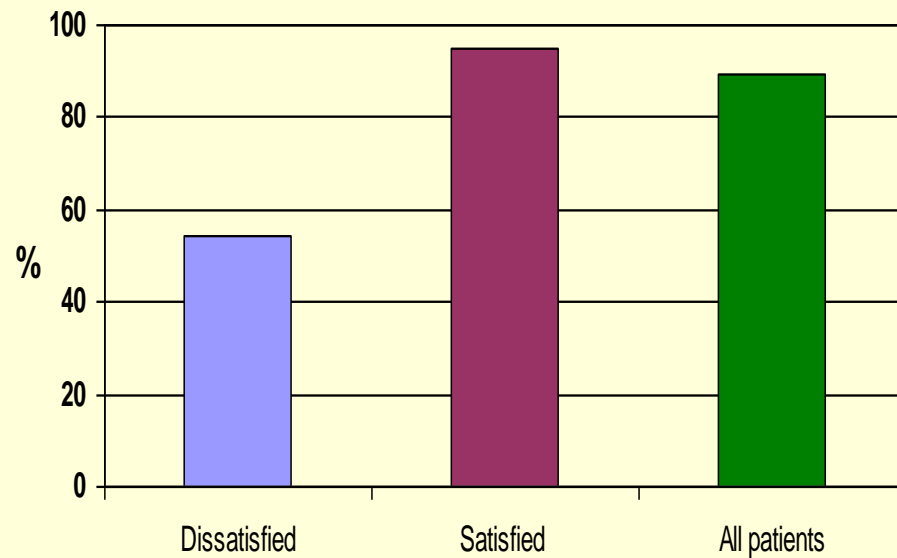
80.1% of the patients were satisfied with the result of the myringoplasty and 12.6% were dissatisfied. Overall tympanic membrane healing rate was 89,11%. The dissatisfied patients had more often a remaining perforation, but still 55.5% were healed. Compared to those who were satisfied, dissatisfied patients had more postoperative complications; 9.3% postoperative infections, 3.6% tinnitus and 0.8% chorda symptoms compared to 2.9%, 0.6% and 0.4% respectively for the satisfied group. Among the satisfied patients 83.4% had a postoperative hearing gain. Dissatisfied patients had poorer hearing results, as many as 39.3% had a hearing loss while 55.3% had a hearing gain. The hearing result was not dependent on healed tympanic membrane. Of the dissatisfied patients with a healed tympanic membrane 41.0% had a hearing loss and in the group with a remaining perforation 37.5% had a hearing loss.

Results

Patient satisfaction after myringoplasty
(n=3091)

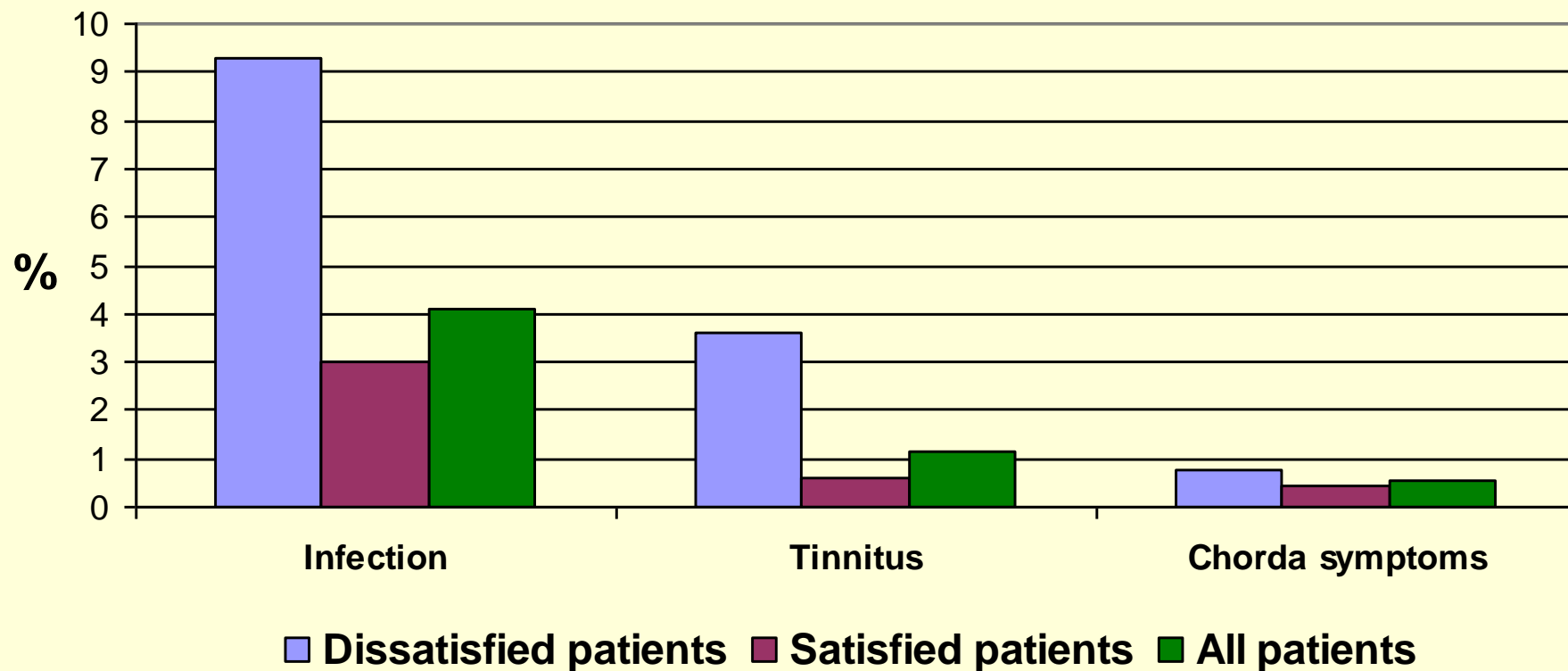


Healed tympanic membrane in satisfied
(n=2476) and dissatisfied (n=388) patients



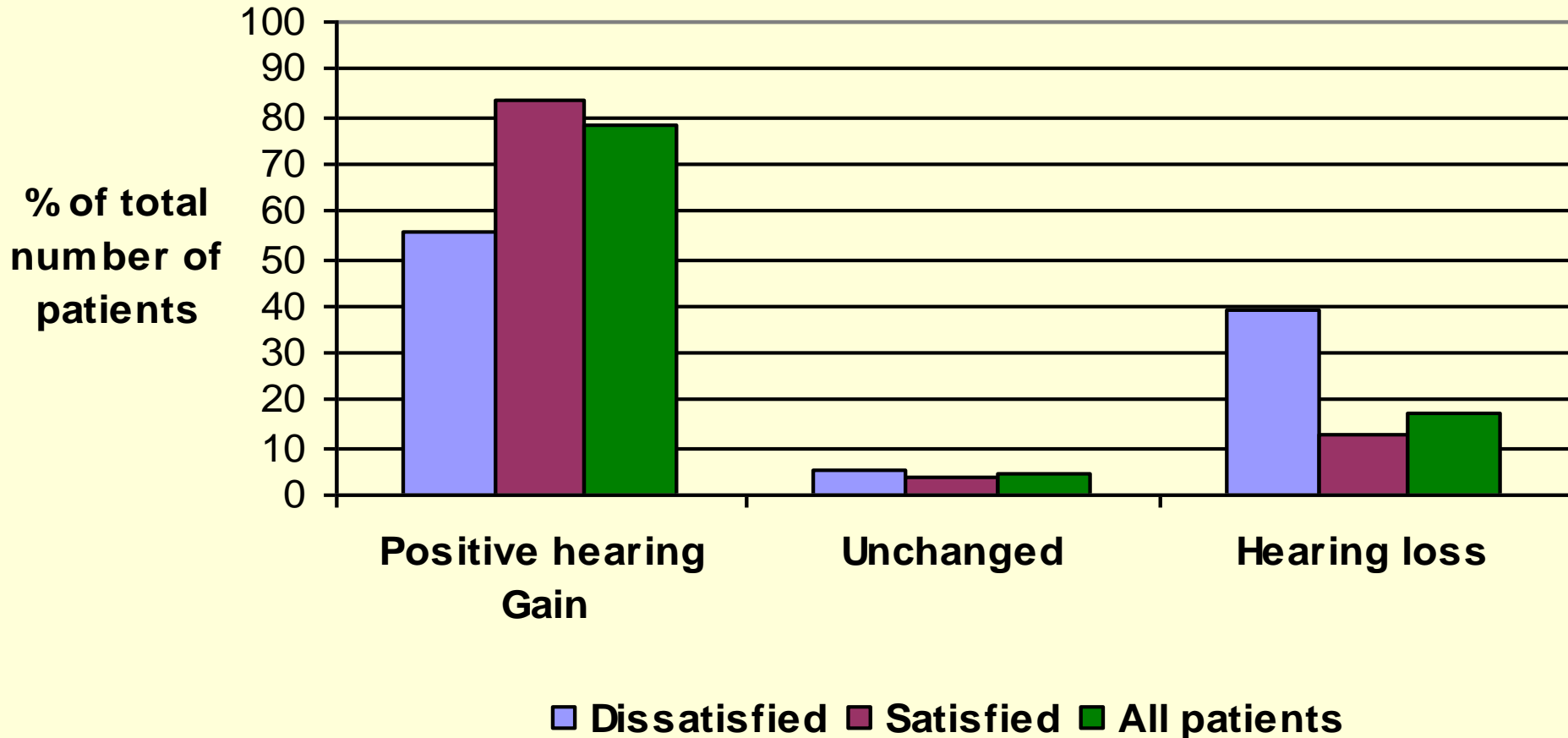
Results

Postoperative complications in satisfied (n=2476) and dissatisfied (n=388) patients



Results

Percentage of satisfied (n=1010) and dissatisfied (n=150) patients with postoperative hearing gain and hearing loss.



Conclusion

Healed tympanic membrane after myringoplasty is the result the surgeon aims for, and this is important for the satisfaction of the patient.

However, healing does not necessarily imply a satisfied patient as this is also dependent on hearing results and lack of postoperative complications.



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