

Ear syringing

Wax in the outer ear is normal. Some people do not produce enough wax and this can result in dry, itchy ears. Others tend to produce an excess of wax that can build up and “block” the ear making hearing difficult.

Why is ear syringing done?

Usually to remove a build up of wax or foreign body, such as an insect from the outer ear canal.

How is it done?

The ears are first inspected using an instrument called an auroscope. This is to determine that wax or a foreign body is present and it is suitable to remove by syringing.

A jet of warm water is gently directed into the ear canal to flush out any debris. This is an unusual sensation of whooshing in the ear. It should not be painful. Some patients report a temporary period of dizziness following syringing. This is due to the mechanism for balance located in the inner ear, being stimulated. This does not occur with everyone and is brief.

What are the Risks?

The major risk is perforation of the ear drum. Those especially at risk of perforation during an ear syringe include those who had grommets or ventilation tubes in their ears as a child, or anyone who has previously had a perforation or ear surgery.

Please notify the nurse or doctor performing this procedure if any of these apply to you.

We sometimes recommend you instill olive oil into your ear(s) for 2—3 days prior to having them syringed to help soften the wax and make it easier to flush out.

We strongly recommend you do not use cotton buds to clean your ears at home.

If your condition does not improve and your general practice (GP) is unavailable, contact the 24 Hour Surgery.

If you require further medical assistance and your general practice (GP) is unavailable,
contact the 24 Hour Surgery:
Phone 365-7777, 401 Madras Street.

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**24 Hour Surgery
401 Madras Street**

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