

# Ear Care Clinic

Unfortunately, we do not have the resources to offer routine wax removal follow-ups for people with normal ears. This leaflet explains what the changes are to the Ear Care Clinic.

## What are the changes?

We will still see patients with ear wax and normal ears via a new referral from your GP but there will be **no follow-up appointment**. Once your ear has been cleaned it will be your responsibility to ensure wax obstruction does not recur – we have provided advice in this leaflet to help you with this. If the wax obstruction does recur you will need to go back to your GP for a further referral.

Patients with structurally abnormal ears, for example those with mastoidectomy cavities, will continue to get regular cleaning.

**Please read the information below and follow the instructions to prevent wax obstruction.**

## What is ear wax?

Ear wax is a normal product of the cleaning process of the ear canal. The ear canal is being constantly cleaned by the movement of skin from the ear drum to the outer ear. The skin may be thought of as an escalator constantly removing any debris from the ear canal from inside to the outside. Ear wax is only produced by the outermost third of ear canal skin.



## Instruction to avoid ear wax obstruction

- 1. Do not interfere with your ears.** Do not use fingers or instruments (e.g. cotton buds) to attempt to clean your ears. Do nothing and the natural movement of the skin – the “escalator” – will remove the wax for you. If you interfere, then the wax may get pushed deep in the ear canal, become impacted (solidified in a lump), and/or damage your ears.
- 2. Keep your ears dry.**
- 3. Use regular (once weekly) wax solvents.** If it has proven necessary for us to remove wax from your ears, following this you should use regular (once weekly) wax solvents such as olive oil, bicarbonate drops or branded drops from the chemist – ask your pharmacist for advice.
- 4. Treat eczema of the outer ear.** If you get regular itching of the outer ear skin this should be treated with regular (daily) emollient such as E45 and, if necessary, a topical steroid such as Hydrocortisone 1% used very sparingly for a few days only for any breakthrough itching.

Again, ask a pharmacist for advice. Itching causes interference with the ears and wax to be forced into the ear canal. The skin can also become infected.

If you follow these instructions you will not need regular cleaning of the ears. If you do develop wax build up despite these measures please see your GP to obtain a further referral. You will be seen on one occasion and no follow-up will be arranged.

## Contacting us

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**Please ask if you need this information in another language or format.**

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