Wax removal in the Targeted Wax Removal Clinic



You have been referred for wax removal as part of your Adult Assessment Pathway through the Audiology Department. These referrals are made in cases where the wax may be contributing to the symptom, for which you have attended; it is preventing your planned assessment or tests; or it is interfering with your planned management. This leaflet explains how to prepare for the clinic, what will happen next and any risks involved.

Before your appointment

Wax removal in the Targeted Wax Removal Clinic is done using microsuction. This is a procedure where the clinician uses magnification (such as a microscope) and a thin tube connected to a vacuum pump, to remove the wax. They may also use other instruments if needed.

You can help with this procedure by using drops for at least five days, leading up to your appointment. Do not worry if you have not had the opportunity to do this in time, as it may still be possible to remove the wax.

- Olive oil: Olive oil will help to soften the wax and is useful for longer term use, for people with recurrent wax issues. You can use olive oil from home or purchase a spray from the pharmacy. Olive oil does not dissolve the wax but does softens it.
- Sodium bicarbonate drops: Sodium bicarbonate drops actively dissolves the wax. This type
 of drop is a quicker, more effective method for wax removal but should only be used for 7-10
 days at a time. If you have had a perforation (hole in your ear drum) or have had
 previous ear surgery, it is best to avoid these drops, without checking with a hearing
 specialist first, as they can cause discomfort.
 - You will then need a break before using them again, if required.
- Other drops are available over the counter but you should discuss the use of these, in the context of your ear and health history, with your pharmacist, before you use them

During the procedure

As with any procedure there can be some small risks. There is a low risk of less significant side effects, such as a small scratch from the equipment or a little discomfort. These are uncommon but do happen (3 - 14% chance), though they rarely require any further action. There is a small risk of a complication affecting the ear or the function of the ear but these are rare (equal to or less than 0.1% chance). If this happens it may require further treatment.

Some people may not be suitable to have this procedure done in clinic. For example, those who are taking some blood thinning medications; those have active or recent ear infections; those with previous surgeries or injuries to the ear; or those who have experienced complications from

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the procedure previously. For these patients, alternative arrangements for treatment will have to be considered.

If you have a perforation or tinnitus, which is made worse with loud noise, the clinician will discuss whether it is possible to proceed with the procedure as caution is recommended. This will decided on an individual basis.

Discuss any issues or concerns you have with the clinician at your appointment.

If you do not wish to go ahead with removal of the wax in this clinic, we will be able to discuss your options at that stage.

At the end of your appointment

We will only arrange for removal of wax in this clinic, where it will help with you with testing or management of your condition. When the wax is successfully removed, you will be able to return to your regular Audiology pathway. For this reason, we will not offer any routine or regular follow-up, once the wax has been removed.

Contacting us

If you have any questions about wax removal do feel free to contact us via 0118 322 7238 and the admin team will contact a member of the wax removal team for you.

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Email: <u>audiology.royalberkshire@nhs.net</u>

Visit: www.royalberkshire.nhs.uk/wards-and-services/audiology.htm

To find out more about our Trust visit www.royalberkshire.nhs.uk

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

Audiology, July 2023

Next review due: July 2025