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Short Communication

Grommet insertion using a branula

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Abstract

Objective: To develop an easy method of performing myringotomy and grommet insertion, using minimal instruments.

Methods: An ear speculum and a branula were used.

Results: This method was found to be useful.

Conclusion: An easy method of performing myringotomy and grommet insertion is proposed.

Key words: Middle Ear Ventilation; Grommet Insertion; Otitis Media With Effusion

Introduction

Myringotomy involves the use of an ear speculum, myringotomy knife, ear sucker and straight forceps to hold the grommet. The method detailed below requires only a size 16/18 branula and an ear speculum, thus obviating the need for other instruments.

Method

The myringotomy incision is made with the branula (size 18) itself, and a suction tube is connected to the branula to establish the presence of fluid.

The tip of the branula is pierced gently into the waist of the grommet (if made of plastic) (Figure 1a) to give the correct angle for view. Care should be taken not to pierce too deeply, lest the grommet be cut. The branula is then reinserted into the ear canal and the grommet inserted into the myringotomy incision. Once the grommet is well past the incision, withdrawing the branula will release the grommet into the correct position, as the posterior part of the myringotomy incision will supply a countering effect. In the event of deeper piercing of the needle of the branula into the waist of the grommet, the plastic cannula covering the branula needle can be advanced to release the grommet past the myringotomy incision.

If the grommet is made of metal, the needle tip of a size 16 G branula is pushed into the opening of the grommet (Figure 1b). The branula is reinserted into the ear canal, and the grommet inserted into the myringotomy. Slight retraction will release the grommet, and the posterior part of the incision will supply a countering effect to aid this. If the grommet becomes stuck to the needle, the grommet may be released by advancing the plastic cannula of the branula. This method can also be used for inserting plastic grommets, if one does not want to cause damage to the grommet by using the grommet piercing method suggested above.

Attaching a 2 cc syringe to the branula improves its length and grip (Figure 2). The branula can also be bent to any angle suiting the surgeon's view (Figure 2).

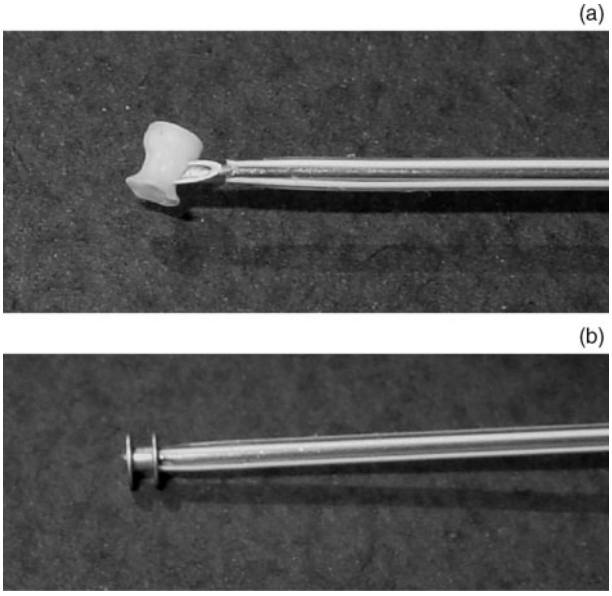

Fig. 1

Magnified view showing (a) the plastic grommet pierced by the branula needle, and (b) insertion of the branula needle into the grommet opening.

Fig. 2

A 2 cc syringe attached to the branula to give additional length; the Figure also shows that the branula can be bent to suit the surgeon's view.

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Summary

A simple method of performing myringotomy and grommet insertion, using a branula, is proposed.

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