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Use of surgical scrub sponge for auricular dressing



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Key words: auricular; bandage; dressing; ear; sponge; surgical scrub sponge.

SURGICAL CHALLENGE

Creating an adequate dressing after auricular surgery can be challenging because of the delicate 3-dimensional anatomy of the ear. An adequate dressing not only protects the surgical site but also prevents hematoma and facilitates wound healing. The empty postauricular space has to be filled with care, preventing the ear from being pressed to the mastoid bone because of subsequent risk of pressure sores or necrosis.

SOLUTION

We present a dressing technique that we have used in our practice for several years without complications. We apply the dressing after auricular surgery, in most cases, after skin cancer surgery with reconstruction of the auricle (Fig 1, A) or wedge closure. The ear is dressed with a nonadhesive dressing of choice. To replete the postauricular space we use a surgical scrub sponge (MedicaBrush, Medica Europe BV, Oss, North Brabant, the Netherlands). The use of a surgical scrub sponge was described earlier in fixation of skin grafts.¹ We cut the sponge with a bandage scissor in a curved, wedge-shaped design (Fig 1, B and C). The elastic material of the sponge allows a comfortable bandage that forms to the ear anatomy, making it possible to provide the desired pressure bandage (Fig 1, D). Anteriorly, the remainder of the sponge or another dressing can be used (Fig 1, E). The dressing is fixed by a head bandage or adhesive tape (Fig 1, F).

The advantage of using this sponge dressing over gauze to fill the postauricular space is that gauze that has absorbed blood dries out and becomes hard, which causes undesirable excessive pressure on the ear. Other foam dressings can also be used, but the surgical sponge is preferred because it is thick and cheap.

REFERENCE

1. O'Neill JK, Davies A, Orlando A. A practical tie-over technique: surgical scrub sponge. *Dermatol Surg.* 2015;41(10):1194-1196.

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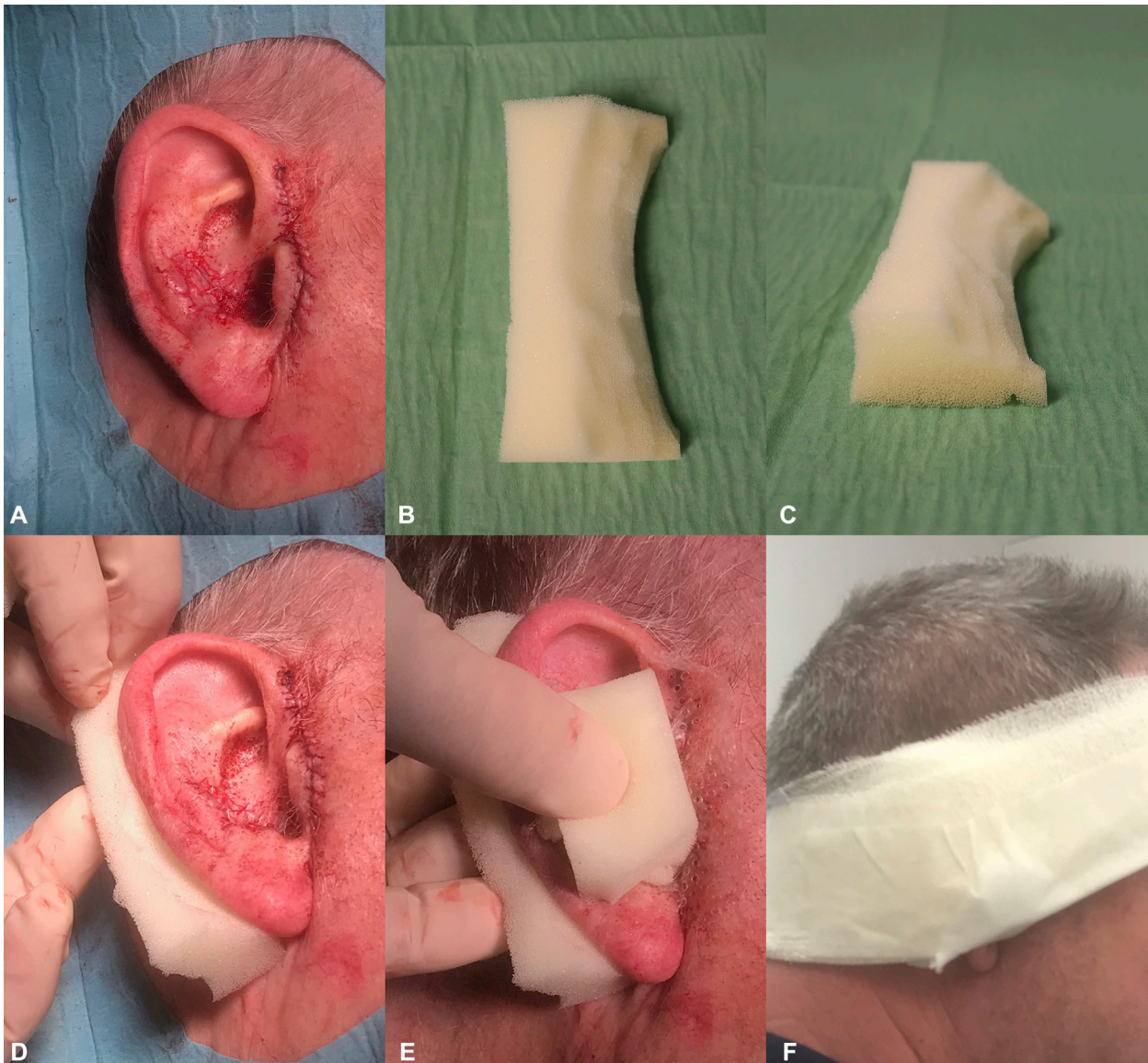


Fig 1. Use of a surgical scrub sponge for auricular dressing. **A**, Full-thickness graft on the concha, with donor skin from the preauricular area. **B** and **C**, The sponge is cut in a curved wedge shape. **D**, The sponge is placed in the postauricular space. **E** and **F**, The remaining sponge is placed over the graft in 2 layers (**E**) and covered by gauze and a head bandage (**F**).