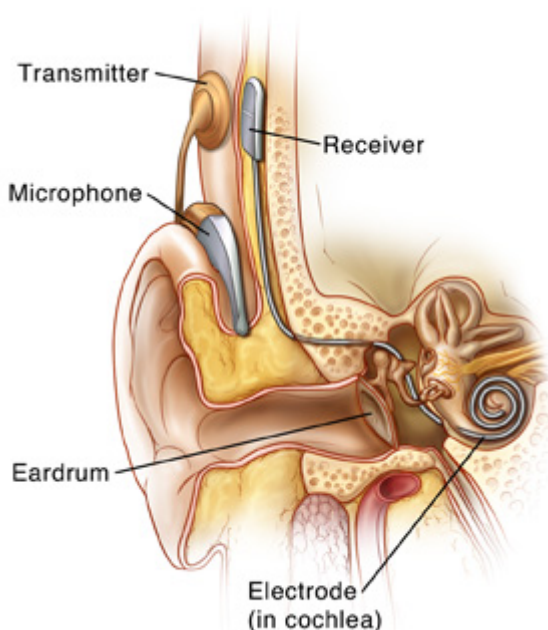


Cochlear Implant Surgery



A cochlear implant is a device that directly stimulates the nerves related to hearing. It can treat hearing loss that will not respond to hearing aids or other listening devices. During cochlear implant surgery, the device is implanted into the inner ear (cochlea). Hearing is not restored right after surgery to allow the wound to heal. In 2 to 4 weeks after surgery, depending upon age and healing, the device is activated and your hearing is restored to varying degrees. Typically, only one implant is placed, but an implant can be placed in both ears, if needed. You and your healthcare provider will discuss what's best for you.



Preparing for surgery

Prepare for the procedure as you have been instructed. In addition:

- Be sure to tell your healthcare provider about all medicines you take. This includes over-the-counter medicines. It also includes vitamins, herbs, and other supplements. You may need to stop taking some or all of them before surgery as directed by your healthcare provider.
- Follow any directions you are given for not eating or drinking before surgery.

The day of surgery

The surgery takes about 3 hours. Before the surgery begins:

- An IV (intravenous) line is put into a vein in your arm or hand. This line delivers fluids and medicines.
- You will be given medicine (general anesthesia) that allows you to be asleep and be free of pain during the surgery.
- The area around the implant site will be shaved.

During the surgery

- The surgeon makes an incision behind the ear. The mastoid bone is exposed. This is the bone you can feel behind the ear.
- The cochlear implant is placed inside a hole made in the mastoid bone.
- The surgeon makes an opening in the cochlea, in the inner ear, and places electrodes. The electrodes connect to the implant.
- The skin incision behind the ear is closed with sutures.
- If an implant is being placed in the other ear, this may be done at this time.

After the surgery

You will be taken to the postanesthesia care unit (PACU) to be closely monitored as you wake up from the anesthesia. You may feel sleepy, dizzy, and nauseated at first. You will be given medicine to manage any pain. Once you are awake and stable, you may then be taken to a hospital room to stay overnight or you may go home the same day. Once you are ready to go home, you will be released to an adult family member or friend. Have someone stay with you for the next couple of days to help care for you as your healing begins.

Recovering at home

Recovery time varies for each person. Your healthcare provider will tell you when you can return to your normal routine. Once at home, follow the instructions you have been given. While you recover:

- Take prescribed pain medicine exactly as directed. Take it on time. Don't wait for the pain to become more severe before you take the medicine because it may be harder to control.
- Don't drive until your healthcare provider says it's OK. Never drive when you are taking pain medicines.
- Care for incisions as instructed by your healthcare provider. Ask your provider when you can bathe and wash your hair.

When to call your healthcare provider

Be sure you have a contact number for your healthcare provider. After you get home, call if you have any of the following:

- Chest pain or trouble breathing (call 911)
- Fever of 100.4° F (38° C) or higher, or as directed by your healthcare provider
- Pain that does not get better with medicine
- Symptoms of infection at an incision site, like increased redness or swelling, warmth, worsening pain, or foul-smelling drainage
- Clear or watery fluid coming from the incision or your nose
- Symptoms of meningitis, an infection of the covering of the brain and spinal cord (they may include increasing neck stiffness, sensitivity to light, dizziness that gets worse, or facial weakness—this is very rare)
- Any other new symptoms that concern you

Follow-up

During follow-up visits, your healthcare provider will check your healing. Stitches will be removed 7 to 10 days after the surgery. In about 3 to 6 weeks after surgery, once the incision has healed, the outer part of the implant

is attached behind your ear. This will allow the device to work. Continue to follow up with your healthcare provider as directed. Speech and hearing specialists will help you adjust to your implant.

Certain vaccines can help prevent meningitis in people who have a cochlear implant. Meningitis is inflammation (swelling) of the lining of the brain and spinal cord. Be sure to keep current with all recommended vaccinations and talk with your healthcare provider to learn more.

Risks and possible complications

Some risks of cochlear implant surgery include:

- Bleeding
- Infection
- Dizziness
- Vertigo (spinning sensation) that lasts up to 6 weeks
- Tinnitus (ringing or buzzing in your ears)
- Numbness around ear
- Changes in sense of taste
- Facial nerve injury
- Damage to nerves and blood vessels at or near the incision site
- Leakage of cerebrospinal fluid
- Leaking inner ear fluid
- Device failure
- Rejection of the implant by the body
- Risks of anesthesia

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