

2nd World Congress of *Advances in Otorhinolaryngology and Head and Neck*

July 09-10, 2026 | Frankfurt, Germany



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Costal cartilage graft harvesting for auricular reconstruction: donor-site morbidity assessment

Auricular reconstruction is a challenging procedure, and the use of autologous costal cartilage represents the gold standard for the treatment of congenital microtia. Given that adolescents constitute a substantial proportion of patients undergoing this type of reconstruction, age-related psychosocial aspects must be carefully taken into account. The aim of this study was to evaluate postoperative patient perception of donor-site morbidity following costal cartilage graft harvesting and its impact on social and physical activities. At our institution, the University Hospital of Parma (Italy), approximately 350 cases have been treated to date. In the present study, We included patients treated between 2010 and 2020. Data collected included: scar evaluation, asymmetry of the thoracic profile, sport participation before and after surgery, physical limitation, donor-site long-term discomfort, postoperative pain. A total of 100 patients were enrolled in the study (58 males and 42 females; mean age: 13.58 years), reporting good long-term aesthetic results at the thoracic site, with female patients showing slightly better outcomes. The majority (82 %) participated in sports before surgery, and 70 % continued the same activities afterward. Minimal chest deformity or thorax asymmetry was reported by 30 patients (30 %). The study confirms that postoperative donor-site morbidity following costal cartilage graft harvesting is low. Sporting activities do not appear to be significantly affected by ear reconstruction procedures, supporting social and psychological development in growing patients.

Keywords: Auricular reconstruction; Congenital microtia; Costal cartilage harvesting; Donor-site morbidity.

Biography

Fifth-year resident in Maxillofacial Surgery at the University Hospital of Parma. International training period with Dr. John Reinisch at K&B Surgical Center, Beverly Hills, Los Angeles.

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