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Comparative Study of Myringoplasty Using Temporalis Fascia in Wet and Dry Ear

Chronic otitis media (COM) is characterized by an ongoing inflammation of the mucoid layer middle ear and mastoid cavity, often leading to tympanic membrane perforation and conductive hearing loss. The use of temporalis fascia graft for myringoplasty remains the gold standard method of tympanic membrane perforation repair. However, the effect of the middle ear state - whether dry or wet—on surgical outcomes and hearing improvement remains debated. The aim of the study is to compare graft take rates and outcomes of hearing following surgery in dry and wet ears of patients undergoing Type I tympanoplasty. We conducted a prospective comparative study was conducted on 54 patients aged 18–50 years with tubo-tympanic type COM and an associated central perforation. Patients were equally divided into two equal groups: Group I (dry ear, n = 27) and Group II (wet ear, n = 27). All patients underwent a Type I tympanoplasty using temporalis fascia graft by postauricular underlay technique. Preoperative and postoperative hearing thresholds were assessed using pure tone audiometry (PTA) at 2 and 6 months. Graft uptake was determined otoendoscopically. Statistical analysis was performed using paired and unpaired T-test and chi-square test, with $p < 0.05$ considered statistically significant. The mean age of patients with was 37.1 ± 10 years, with female patients predominated (77.7%). In the dry group (Group I) we achieved graft uptake in 96.3% of ears and whereas the wet ears group (Group II) achieved graft uptake in 92.6% of ears ($p > 0.05$). Mean PTA improved from 55 dB to 40 dB in dry ears and from 64 dB to 43 dB in wet ears, showing significant postoperative hearing gain in both groups. The use of temporalis fascia myringoplasty achieves excellent graft uptake and hearing improvement in both dry and wet ears, and minimal discharge at the time of surgery does not adversely affect outcomes. Therefore, a wet ear should not preclude tympanoplasty.

Keywords: Chronic otitis media · Myringoplasty · Temporalis fascia graft · Tympanoplasty · Dry ear · Wet ear

Biography

As an ENT surgeon and Ex Senior Resident at MGIMS Sevagram, Wardha, I combine strong clinical judgment with a patient-oriented approach to deliver exceptional head and neck care. My medical journey began with an intensive internship at GMC Nagpur and Akola, followed by vital frontline service as a Medical Officer managing busy outpatient flows during the COVID-19 pandemic.

During my MS-ENT residency at MGIMS, I gained extensive surgical exposure, including a specialized 45-day neurosurgery posting where I independently performed craniotomies. I have since built a robust surgical repertoire, mastering conventional and endoscopic tympanoplasties, septoplasties, and fracture repairs. Actively engaged in academic medicine, I presented research at MENTCON 2023 and successfully defended my MUHS-approved thesis on myringoplasty. Today, I thrive in high-stress environments, balancing active surgical practice and outpatient care while mentoring the next generation of junior residents and interns.