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Ventilation Tubes in Secretory Otitis Media Associated with Cleft Palate: A Retrospective Analysis

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Abstract: Aim: The insertion of ventilation tubes at the time of cleft palate surgery is a controversial issue. We assessed the status of hearing and the middle ear in long-term follow-up after the treatment of cleft palate. Materials and Methods: 56 patients with cleft palate repair at the ages of 15 to 24 months were included in the study. The control group consisted of 15 patients in whom ventilation tubes were inserted previously for secretory otitis media. They all had audiologic analyses. Results: In the control group, only one patient was found to have perforation of tympanic membrane on one side. In the study group, tympanograms in those with intact tympanic membranes showed no abnormalities. The pure tone audiometric tests showed conductive hearing loss only in five cases. Their hearing threshold varied from 25 dB to 45 dB. No patients in the control group had conductive hearing loss. There were no statistically significant differences between the two groups ($P = 0.42$) with respect to complications in the long-term. Conclusions: The findings in our study show that there may be no need for ventilation tubes on a routine basis in cleft palate patients especially when the long-term results in those patients are taken into consideration.

Key Words: Cleft palate, secretory otitis media

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