

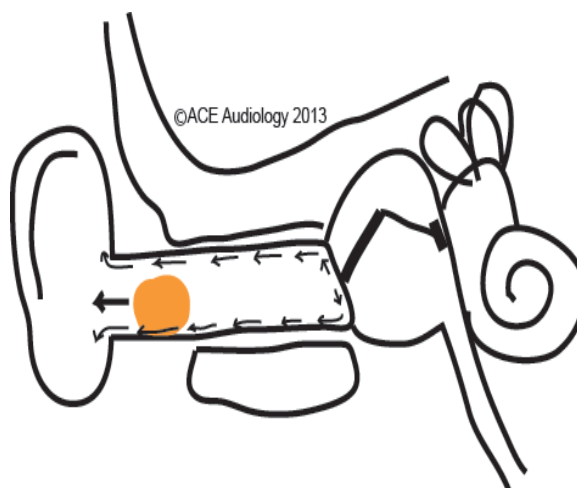


Earwax: the what, where, how and why...

The external ear produces wax (cerumen) from viscous secretions of the sebaceous and sweat glands located in the outer cartilaginous section of the ear canal. Earwax acts to protect the ear canal from the environment and also has some antimicrobial properties.

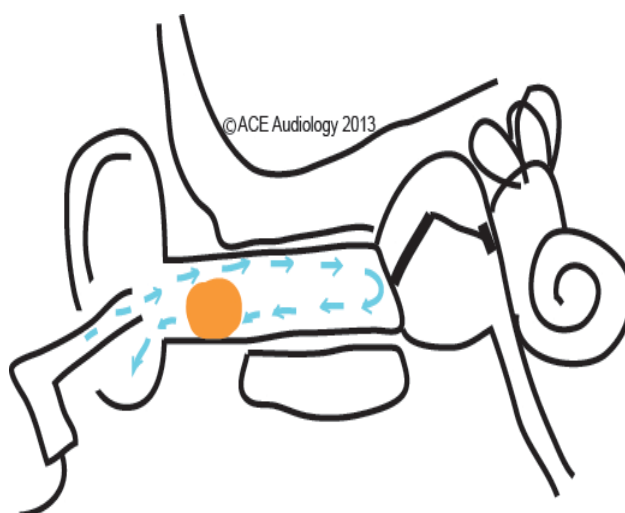
Normal migration

The skin in the ear canal grows outwards from the eardrum to the outer ear in a self-cleaning motion. The wax migration can be affected by excessively hairy ear canals, tortuous canals and some outer ear medical conditions. The most common cause in adults is from cotton buds being introduced into the ear canal. Whilst this action retrieves a small portion of wax, a larger quantity is usually pressed deeper into the sensitive bony canal where it cannot be retrieved without expert intervention.

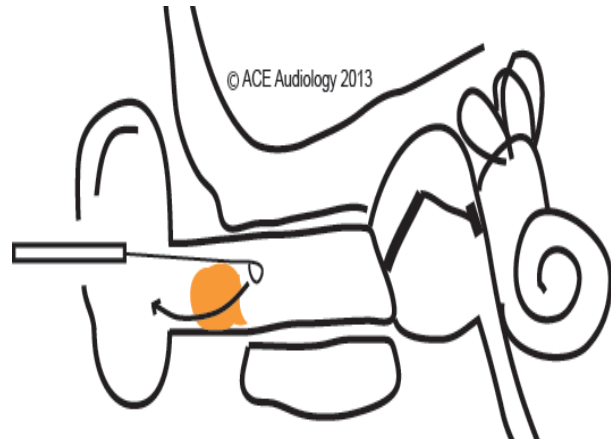


Some common wax removal methods

Syringing involves warm water being directed into the canal with the backwash dislodging the wax. Pre softening wax with pharmacy obtained drops helps considerably in the removal process. In experienced hands this is an effective treatment but does carry a very small risk of perforation if the pressure and direction is not well controlled. In some cases, such as pre-existing perforations or other medical conditions, then syringing is contraindicated. Self-syringing is possible however even professionally informed individuals report significant difficulty obtaining success.



Manual removal involves the use of specialist removal tools. This method is used by Audiologists and Ear Nose and Throat Specialists. The procedure is safer than syringing and particularly applicable to those cases contraindicated for syringing. Binocular lenses with a strong light source are required to visualise the wax and to guide instruments carefully in the canal.



Suctioning under microscope control is sometimes used by ENT specialists in difficult situations.

Ear candling, although achieving some popularity in recent times, is scientifically discredited as an effective means of removing ear-wax (*ref: "Audiology Now" a publication of the Audiological Society of Australia*).

How should wax be managed?

If you wear a hearing aid then you can be more prone to wax accumulation and your audiologist can usually manage this for you.

If you have an ear canal anatomy or dusty work environment that makes you prone to wax accumulation you should establish a routine review with your doctor or consult an Audiologist.

Please refrain from removing wax yourself with a cotton bud, as this is likely lead to deep compacted wax build-up.