

**A MIDDLE EAR POLYP:**

**Good prognosis condition that shows up in two places with different symptoms**



**Overview—“I don’t understand what the nasopharyngeal-aural (NPA) polyp condition is; please help me understand the condition and the treatment.”**

The nasopharyngeal-aural inflammatory polyp (NPA polyp) condition is seen in **young cats**. The age at which problems are first noted must be taken into account. If the history of your pet is not known specifically from young kittenhood, and symptoms have “always” been present since you have known your pet, this condition might be the problem if your pet is 4yrs old (for example). As a patient ages, the likelihood of **other conditions with similar symptoms, but different prognoses and different treatment plans**, goes up.

It is thought that these masses originate in the middle ear, and they expand from that source either down the Eustachian tube into the back of the nose/throat (normal anatomy structure that allows your ears to “pop” when flying on a plane or diving deep under water) or up through the ear drum into to the ear canal. The middle ear is the location that many kids have trouble with that requires them to “get tubes” put in.

When the mass grows up through the ear drum and into the ear canal, the kitten’s/cat’s get “ear infections” that are irritating (head shaking and scratching) and gooey (lots of smelly discharge and crusting). When the mass grows down the Eustachian tube into the back of the nose/throat, the kitten/cat makes loud snoring noises like a bulldog, and they are often “slow, calm” kittens (probably because they cannot catch their breath enough during play and exercise.)

The veterinary science has not fully explained why this abnormal tissue starts to grow in the middle ear, but because it is almost always seen in young cats, the theories involve inflammation related to viral, upper respiratory infections.

**“Why is this procedure being recommended for my pet?”**

The large size of this abnormal tissue and the two difficult locations are what make it necessary for general anesthesia and possibly surgery to remove the offending polyp. There has not been any success with medical treatment of these polyps.

Additionally, when the polyp is coming up from the middle ear through the ear canal, there is always an ear infection that extends through the ruptured ear drum into the middle ear. This needs vigorous cleaning and tissue removal to make sure the middle ear does not remain infected after the polyp is removed.

**“What options do I have to treat my pet’s condition?”**

As mentioned, there are no medications that will shrink this abnormal tissue.

If the polyp is in the back of the nose/throat, the procedure is performed through the open mouth by moving the soft palate aside and removing the tissue.

If the polyp is in the ear canal, the procedure is performed with a handheld scope into the ear canal and removing tissue. The ear canal and middle ear is flushed through the same scope.

Since the abnormal tissue starts in the middle ear, some cases will need or benefit from a surgery procedure (ventral bulla osteotomy) that goes into the middle ear (with a larger surgical opening) and more thoroughly clears out the lining tissues that are growing this polyp.

The approach to treatment can either be to “try” the simple removal (by mouth or ear canal) and monitor for regrowth; OR under one anesthesia, remove the mass and surgically go into the middle ear and do the more thorough clearing of abnormal tissues. Approximately 9 of 10 patients will only need the conservative, simple procedure.

Patients with the ear infections and ruptured ear drums will benefit from 2-4 additional episodes (once weekly) of brief, deep sedation and ear flushing to clear up the middle ear infection and allow the ear drum to re-grow.

**“What postoperative complications do I need to know and understand when considering this surgery?”**

If the signs of middle ear disease are already present (head tilted to the side, 3<sup>rd</sup> eyelid is elevated, pupils are unequal), the treatment may not reverse these signs.

If the above signs of middle ear disease are not present, treatment may result in these same signs temporarily or permanently. The middle ear is very sensitive to any disruption by diseased tissue, infection or surgical manipulation.

**“Are there situations when the surgical outcome is not what we hoped it would be?”**

These polyps can re-grow after the simple removal procedure and after the additional middle ear surgery; it is very uncommon but possible. An ongoing or recurrent middle ear infection is also possible if not fully cleared after original procedures or a new infection develops because of a poorly healed ear drum.

**“How is my pet’s life and lifestyle likely to change after this procedure?”**

If the polyp tissues are removed and the ear infection is cleared up, your pet will be more comfortable and breath better/normally.

**“Are there things I can do to prepare myself, my home and/or my pet for this procedure?”**

It is common for the irritation from the ear canal procedure and cleaning to result in head shaking and scratching. Blood-tinged fluid will be sprayed around when they shake their head; planning for this will prevent soiling of furniture, etc.

Your cat may be dizzy, stumbly for a few weeks. Setting up a safe location for them, with no access to stairs or high surfaces (jumping up or down) will be beneficial.

**Outpatient surgery and anesthesia** can be uncomfortable, painful, disorienting, and frustrating experiences for animals; watching your pet work through the early postoperative period and recover from anesthesia and pain medications can be worrisome, scary and frustrating for pet owners. The majority of the time this period of difficulty is brief, and *your pet is actually more comfortable and secure at home with you*. Sometimes it doesn’t feel like that at two in the morning when your pet is anxious and not consolable, and you are unsure of what to do. You always have the option of transporting your pet to a 24-hour veterinary facility postoperatively. If you do not want to have your pet home in the first few days postoperatively, please advise your primary care veterinary staff. They will provide contact information for a local 24-hour veterinary facility and help get an estimate for the ongoing care.

It is important that you have proper expectations about this procedure; your experience and your pet's outcome will benefit greatly. Please discuss this information with your veterinarian when working through the decision-making process regarding **the removal of nasopharyngeal-aural (middle ear) polyps**.

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