Cauliflower ear: a common sport's complication

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Abstract

Auricular haematoma is often seen in the external ear of people commonly involved in contact sports. Failure to recognize and drain the haematoma results in cauliflower ear.

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A 12-year-old child presented with a two month history of a swelling on the ear. He was seen in the emergency room and the diagnosis of puogenes abces was evoked. A flattening was carried out but without improvement. He denied any discharge, hearing loss, bleeding or being bitten. He was a healthy child with unremarkable pathological history. Examination revealed the entire ear to be red, shiny, and there was a fluctuant, warm and tender swelling over the anti helix. However, the structural integrity of the ear was maintained. We suspected the notion of repeated trauma. On further questioning, it was found that the patient was a child boxer. The haematoma was drained with a time off from training. The patient recovered without any residual deformity.

Othematoma is a frequent reason for consultation in the emergency department. It ccurs after trauma to the face when blood and serum accumulate between the perichondrium and cartilage. It is a relatively common condition in contact sports, particularly in wrestling, rugby and boxing. Those who do not use wear protective headgear are at greater risk (1). If left untreated a plate of fibroneocartilage develops from the damaged perichondrium and the resulting scarring and regeneration of the cartilage leaves the cosmetically unsightly "cauliflower ear", characterised by thickening and irregular projection of the ear (2). The primary treatment for othematoma is to aspirate the underlying auricular hematoma and secure a bolster to prevent re-accumulation. This requires a patient be seen within the first six hours after the injury, otherwhise, a more invasive incision may be required. Surgical referral is appropriate for any patient with an existing cauliflower ear, where extensive fibrosis has already occurred, to remove the damaging fibrocartilage (3).

Othematoma must be well known by practitioners because failure to treat in time exposes severe functional and aesthetic complications. The aesthetic results are often extremely disappointing in patients with a longstanding cauliflower ear.

Author Contributions

- 1) ABDELLI Wissal : Writing the article
- 2) SOUISSI Asmahen: Been involved in drafting the manuscript and revising it critically
- 3) Mokni Mourad : Given final approval of the version to be published

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