RISKS AND COMPLICATIONS OF COCHLEAR IMPLANT SURGERY

Cochlear implantation procedures have been performed for over 25 years and are considered safe and effective. Overall, cochlear implantation is a very safe procedure. Every patient must realize, however, that as with any surgery or procedure, there is a small risk of surgical complications during cochlear implantation. The risks of cochlear implant surgery are the same as those associated with any major ear surgery requiring general anesthesia. These risks include but are not limited to:

The normal risks of general anesthesia. This is a very small risk with the modern anesthesia techniques used today. These risks are increased in patients with a family history of adverse reactions to anesthesia, and in patients who are very ill. Most patients undergoing cochlear implantation are healthy and have no difficulty with the anesthesia.

Temporary dizziness and/or temporary disturbance of balance. Dizziness and nausea are fairly common after cochlear implantation. This is due to manipulation of the inner ear. This usually resolves quickly unless balance was poor before surgery.

Temporary increase in tinnitus or ringing in the ear. This also is due to manipulation of the inner ear.

Numbness in area of scar. Major ear surgery often results in numbness and discomfort around the ear. There will be tenderness around the incision site and many patients have a mild headache for several days after the implant. These symptoms usually subside within a few weeks after the surgery.

Change in taste sensation. There is a slight risk that the patient may experience taste disturbances, such as a metallic taste, following the implant surgery.

Risk of bleeding and infection. The bleeding is usually minimal and does not require transfusion. Infections can be treated with antibiotics and local wound care. Severe infections of the device may require its removal, but this is very unusual.

Facial nerve bruising. This nerve running near the site of surgery is carefully monitored throughout the operation. This ensures that bruising of the facial nerve is highly unlikely. In the rare case of injury, some changes to facial nerve function may be permanent.

Device failure. Any man-made device can fail, break or function improperly. This could necessitate removal and/or replacement of the device. The device failure rate is very low.

Loss of hearing. During surgery any remaining hearing in the implanted ear will be permanently lost.