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An improved myringotome

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DIFFICULTY has in the past been experienced in maintaining the cutting edge of non-disposable myringotomes. On occasions it has been observed that unnecessary damage has occurred in tympanic membranes during myringotomy, due to bluntness. Haemorrhage has sometimes been provoked within the intermediate layer of the drum, or a jagged incision has caused post-operative scarring. Consequently a search has been made for a cost-effective method of carrying out myringotomy which at the same time achieved a sharp cutting edge on each and every occasion.

Trials with a 3-inch Hagedorn needle held in a McLay holder achieved a satisfactory surgical result, although great difficulty was experienced in holding the needle, which is rectangular in cross-section, within the circular aperture of the holder. Accordingly this Hagedorn needle holder has been developed, which enables the needle to be held firmly in the correct position and is reversible for application to both left and right ears. It is weighted and comfortable to hold, and knurled to avoid slipping in the hand. The angulation achieved is such that it causes minimal obstruction to the view of the tympanic membrane through a speculum. The locking device ensures that the needle cannot slip. It is easily dismantled for purposes of sterilisation and in ordinary use should require no maintenance.



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The needles are used for only one patient, and the cost of the needles at the time of writing amounts to only 60p per operation.

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