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Patient Information - Ear Wax

What is ear wax?

Wax is an important and natural secretion found in the ear. Wax serves to protect the ear against bacteria, helping to prevent infection. Wax is composed of old skin cells, dust and oil from sebaceous and ceruminous glands. In addition to protecting the ear canal these secretions lubricate the ear, preventing it from becoming too dry. If wax is not causing any problem it is best left alone as the ear is self-cleaning and the wax should naturally clear itself. Ear wax accumulation can be exacerbated by factors such as age, excess hair in ears, working environment, narrow canals and the wearing of earplugs, hearing aids etc.

Managing recurrent wax – recommended maintenance methods

Following the clearance of wax from your ears it is advisable to commence the use of a softening agent on a frequent basis. Regular maintenance of the ears should help to prevent further wax impaction. Whilst there is no evidence to suggest the best type of ear drops to use, experts suggest using either Olive Oil, Almond Oil, sodium chloride (salt water) or sodium bicarbonate drops (NICE 2016).

We recommend the instillation of **TWO drops** of the chosen softening agent into both ears on a **weekly** basis. There may be occasions where this advice will differ (for example- people with Tympanic membrane perforations, Mastoid cavities etc.), in this instance the Aural Care Practitioner will have provided you with the appropriate individual advice.

Inserting Softening drops

It may be easier (if possible) to have somebody else instil the drops into the ear for you. The drops should be at room temperature.

- 1) Lay on a bed with the ear to be treated facing upwards toward ceiling.
- 2) Pull the ear gently backwards and upwards to open and straighten the canal, this will allow the drops to enter deeper into the canal. Put the recommended number of drops into your ear canal.
- 3) Release ear and gently massage the tragus (cartilage to front of ear) to coat all of ear canal with drops.
- 4) Lay with treated ear facing upwards for at least five minutes to allow drops to soak in.

- 5) Place small amount of cotton wool in outer part of your ear for approximately 10 minutes to prevent drops from running out. After ten minutes remove the cotton wool and sit up slowly.
- 6) Repeat the process if necessary in the second ear.

Removal/maintenance methods not recommended

Cotton buds, matches and hair clips – the use of these to try to clear wax from the ear canal is one of the most common cause of impacted wax. Wax is normally only produced in the outer third of the ear canal, by using buds etc. the wax is then forced further down the canal and forms a hard plug against the tympanic membrane. The use of cotton buds, matches, hair clips etc. can also cause trauma to the skin lining of the canal and even perforation of the tympanic membrane (ear drum), thereby also increasing the risk of infection.

Hopi ear Candling- It is claimed that ear candling works by creating a vacuum to draw wax out of the ear canal, however, research has shown that candling did not produce any negative pressure during any trial. Studies showed that ear candling did not remove any wax from the ear, however candle wax was deposited into the ear canals in some trial participants. Ear candling has been found on occasions to cause burns to the outer ear and ear canal, candle wax occlusion of the canal and even occasionally perforation of the tympanic membrane (Seely et al, 1996)).

References –

NICE Clinical Knowledge Summaries (2016) Earwax.
<https://cks.nice.org.uk/earwax#!scenario> accessed 27-02-18.

NICE Earwax removal guidelines (2017)
<https://www.nice.org.uk/news/article/remove-earwax-if-a-build-up-is-causing-hearing-loss-problems-nice-tells-primary-care>. Accessed 27-02-18

Public Health Wales (2011) - All Wales Prioritisation Framework version number 21-12-11.
[http://www2.nphs.wales.nhs.uk:8080/HealthTopicLeads.nsf/85c50756737f79ac80256f2700534ea3/c997185d64441b3980257bb80049f48d/\\$FILE/Prioritisation%20Framework%20Final%2021-12-11.pdf](http://www2.nphs.wales.nhs.uk:8080/HealthTopicLeads.nsf/85c50756737f79ac80256f2700534ea3/c997185d64441b3980257bb80049f48d/$FILE/Prioritisation%20Framework%20Final%2021-12-11.pdf). Accessed 27-01-18

Seely,D.R., Quigley,S.M. and Langman,A.W. (1996) Ear candles - efficacy and safety. *Laryngoscope*. **106**(10), 1226-1229.

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