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Making an ear takes knife of artist

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Abd-Elrahman El Zahed gave up a few pieces of his ribcage Tuesday so that a local doctor could sculpt what the 5-year-old Egyptian boy has hoped for all his life.

A right ear.

Where only a flap of skin existed before, Dr. J. Arturo Bonilla successfully constructed an ear using the boy's own rib cartilage. During the tedious 4-hour surgery, Bonilla chiseled the material into a framework for the new ear, then stretched Zahed's loose skin over the implant.

After another surgery scheduled to take place in about three months, Zahed's ear should look and function just as his other normal ear does, Bonilla said.

"He'll be like all the other kids — and that will mean the world to him," he said.

Zahed was born with "microtia," which means "little ear." The birth defect affects one in every 6,000 to 12,000 children. No cause for the defect is known.

Since birth, Zahed could hear only about half as well as a normal child. But what bothered him even more was how he stood out from other children, his parents said.

"He used to get upset, so I'd tell him to tell his friends, 'God made me like this,'" his father, Ibrahim El Zahed, said Tuesday from the boy's bedside. "So this is just the most amazing thing for him. He's going to be so happy."

Having first read about Bonilla's work on the Internet, the Zahed family recently made the 30hour trip from Cairo, Egypt, to San Antonio's Methodist Children's Hospital. Bonilla is one of a handful of doctors worldwide who has performed microtia surgeries

The state-of-the art procedure requires doctors to essentially act as sculptors, fashioning new creations out of human gristle. Although ear reconstruction can be achieved using other materials such as plastic, silicone and titanium, Bonilla said cartilage is preferred because it's most compatible and least likely to cause infection.

During Tuesday's surgery, Bonilla took out parts of Zahed's sixth, seventh and eighth rib. The missing cartilage should cause the boy no problems as he grows, Bonilla said.

Using a blueprint he'd made earlier of the young boy's normal ear, Bonilla then carved the rib cartilage into a similar ear shape. The new ear framework was then attached to Zahed's head and Bonilla stretched the existing loose skin over the sculpted cartilage.

"That's the point that

it's most dramatic," he said. "You apply the negative suction and it just collapses into shape. You see nothing, and then you see an ear."

Zahed's second and final surgery will entail further skin grafts that will perfect the new ear's shape.

Bonilla also plans to open up the boy's ear canal, so that his hearing will improve. Zahed was fortunate, Bonilla said, because his inner ear is intact.

Some children with microtia lack both outer and inner ear characteristics, he said.

Bonilla, whose training is as an ear, nose and throat specialist, said he now concentrates on ear microtia because of the effect he can have on the children he treats.

"It's extremely gratifying for me to see a kid's sense of confidence shoot up after something like this," he said. "It really does change their world overnight."