Bismuth iodoform paraffin paste: a review

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Dear Sirs,

We read with great interest the above paper by Crossland and Bath.1 The article discusses possible alternatives to bismuth iodoform paraffin paste (BIPP), which our group feels is quite a pertinent issue given the recent BIPP supply problems in the UK.

We would like to briefly add to the list of alternative agents suitable for use in otology, and also to give recommendations based on our practice.

There have been very few studies suggesting alternatives to BIPP. Chevretton et al. concluded that Xeroform is inferior to BIPP due to an increase in adverse effects.2 Nakhla et al. compared BIPP and Tri-advortyl® ointment ear dressing, and found no difference in outcome between the two preparations.3 Zeitoun et al. reviewed the use of BIPP, Pope wicks, Silastic® sheeting and Tri-advortyl, and found that all had similar success rates when used following middle-ear surgery.4 Unfortunately, Tri-advortyl was withdrawn in 2009 due to reduced demand, and a suitable substitute is not readily available.

Our group suggests the use of Polyfax® as an alternative to BIPP. Polyfax is a topical antibacterial agent composed of polymyxin B sulphate and bacitracin zinc. It is currently unlicensed for use in the ear but is used for the treatment of infected wounds, burns and skin grafts.5 When used topically, it has a small side effect profile and is neither ototoxic nor vestibulotoxic.5 Polymyxin B, the antibiotic present in Polyfax, is also present within Otosporin® ear drops. In this latter preparation it is combined with neomycin and hydrocortisone, and provides effective therapy for otitis externa. This highlights the safety and efficacy of polymyxin B when used within the ear.

No evidence exists for the efficacy of Polyfax following middle-ear surgery. We have incorporated Polyfax into our routine practice and have achieved outcomes comparable to those for BIPP usage.

Our group advocates the use of Polyfax following middle-ear surgery. We apply it without gauze and remove it by microsuction two to three weeks later. Routine ear protection advice is given to the patient.

We are in the process of conducting a retrospective review of our caseload; however, more research is needed into the use of Polyfax following ear surgery, and its potential as an alternative to BIPP.

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References
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