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Aural Haematoma in Dogs: Causes, Treatment, and Prevention

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Introduction

Aural haematoma—often referred to as othematoma—is one of the most common ear conditions seen in dogs. It manifests as a swelling on the ear flap (pinna), caused by blood accumulation between the skin and cartilage. While the condition itself is not life-threatening, it causes significant discomfort and can lead to permanent deformity if left untreated. Importantly, it usually indicates an underlying ear disease such as otitis externa or allergic dermatitis.

What is an Aural Haematoma?

An aural haematoma occurs when small blood vessels in the ear flap rupture, allowing blood and serum to accumulate between the skin and the cartilage. The ear becomes swollen, warm, and fluid-filled, often appearing as a soft lump that changes shape depending on the amount of fluid inside (Fig. 1). Dogs with this condition frequently shake their heads or scratch their ears excessively due to the irritation. In most cases, an aural haematoma develops as a secondary condition. The underlying cause is usually otitis externa (ear canal inflammation), ear mites, foreign bodies, or trauma from scratching or shaking (Hewitt & Bajwa, 2020).

Pathophysiology: What Happens Inside the Ear

The pathogenesis of aural haematoma begins with trauma that ruptures the small vessels in the pinna. When blood collects between the skin and cartilage, the two layers separate and form a pocket that prevents natural healing. Without intervention, fibrosis and scarring may occur, creating a permanent deformity known as "cauliflower ear." A study by O'Neill et al. (2021) highlighted that dogs with pendulous or semi-erect ears are more likely to develop this condition due to the increased movement of the pinna during head shaking. Breeds such as Cocker Spaniels, Basset Hounds, and Beagles are especially vulnerable. In addition, dogs suffering from allergic dermatitis, autoimmune disorders, or blood clotting abnormalities are predisposed to vessel fragility and bleeding (Niwas & Kumar, 2025).

Figure 1. Aural haematoma in a dog shows a swollen ear flap (pinna) caused by blood accumulation between the skin and auricular cartilage on the concave surface of the ear.

Epidemiology and Predisposing Factors

Research indicates that breed, ear shape, and chronic otitis are among the strongest risk factors. O'Neill et al. (2021) found that Labrador Retrievers, Bulldogs, and German Shepherds show higher prevalence due to their ear conformation and tendency toward allergic ear diseases.

Environmental factors—such as humidity, parasites, and poor hygiene—also contribute to the risk (T. Rana, 2025).

Diagnosis and Clinical Presentation

Diagnosis is primarily clinical and based on visual and tactile examination. Affected dogs present with a fluctuant, painful swelling on the ear flap. Palpation reveals a soft, fluid-filled structure that may enlarge or shrink over time. Veterinarians often perform fine-needle aspiration to confirm the diagnosis and rule out abscess or tumor. The aspirate typically contains serosanguineous (bloody) fluid. To identify the underlying cause, an otoscopic examination and ear cytology are conducted to detect infection or parasites. Ultrasound imaging is increasingly used to detect internal septations within the haematoma, which can complicate drainage. Palagiano et al. (2023) showed that ultrasound-guided procedures lead to better fluid evacuation and reduced recurrence.

Treatment Options

The main goals of treatment are to relieve pain, remove accumulated blood, prevent recurrence, and treat underlying ear disease. Treatment can be either conservative or surgical depending on the size and chronicity of the haematoma.

1. Conservative (Non-Surgical) Treatment

In mild or early cases, needle aspiration can be performed to remove the fluid, followed by steroid injections to reduce inflammation. Oral or topical corticosteroids may also be prescribed. However, this approach often has a high recurrence rate unless the underlying cause, such as otitis or allergies, is addressed (Hewitt & Bajwa, 2020).

2. Surgical Treatment

Surgery remains the gold standard for definitive management. Common surgical methods include:

- Incision and drainage of the haematoma, followed by quilting or button sutures to reattach the skin and cartilage.
- Vacuum drainage systems, which continuously remove fluid and maintain ear shape (Lahiani & Niebauer, 2020).
- Laser-assisted surgery, which offers reduced bleeding and faster healing in select cases.

Surgical intervention provides long-term resolution, with recurrence rates typically under 10%.

3. Innovative Therapies – Platelet-Rich Plasma (PRP)

In recent years, regenerative medicine has introduced platelet-rich plasma (PRP) as a non-surgical alternative. Perego et al. (2021) demonstrated that injecting autologous PRP into the haematoma cavity promotes faster tissue repair, reduces inflammation, and lowers recurrence risk. Palagiano et al. (2023) further reported that combining PRP therapy with ultrasound-guided drainage produces superior healing and cosmetic outcomes.

Postoperative Care and Recovery

After surgery or aspiration, proper postoperative management is vital to prevent complications. The ear is usually bandaged to apply pressure, and dogs are prescribed antibiotics and anti-inflammatory medications. An Elizabethan collar prevents scratching or shaking during recovery. Addressing the underlying cause, such as otitis externa or allergies, is critical to prevent recurrence. Healing usually occurs within three to four weeks, though minor scarring may persist in chronic cases.

Recurrence and Complications

Recurrence can occur if the drainage is incomplete or if the primary cause remains untreated. Chronic haematomas can lead to fibrosis and thickening of the ear cartilage, resulting in a permanent "crumpled" appearance. Hall et al. (2016) reported that recurrence rates vary among surgical techniques, but careful aftercare and infection control minimize risks.

Prevention

Preventing aural haematomas largely depends on managing ear health and allergies. Regular ear cleaning, inspection for redness or discharge, and early treatment of otitis externa are crucial. Owners should avoid inserting sharp objects or cleaning too aggressively, as this can cause trauma. Dogs with recurrent ear infections should receive allergy testing and routine veterinary care. Niwas & Kumar (2025) emphasized that prevention through consistent

hygiene and monitoring is more effective than repeated treatment.

Future Directions in Research

Emerging research focuses on regenerative therapies such as stem cell-based treatments and growth factor applications that promote faster and more natural healing without invasive surgery. Genetic studies are also exploring breed-specific vulnerabilities, which may enable targeted prevention strategies in the future (Palagiano et al., 2023).

Conclusion

Aural haematoma in dogs is a painful but manageable ear condition most often caused by trauma related to otitis externa or allergies. While conservative treatments can offer temporary relief, surgical intervention remains the most effective approach for long-term resolution. Platelet-rich plasma therapy represents a promising innovation, offering faster healing and reduced recurrence. Ultimately, prevention through proper ear care, prompt management of infections, and attention to allergies can spare dogs from this distressing condition. With early intervention and good aftercare, most dogs recover fully without lasting complications.

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