

Table 1. Duration of clinical detection of chondritis and its percentage

The duration of clinical detection	Percentage
2-3 weeks	70%
3-4 weeks	25%
5-8 weeks	5%

**Figure 1. (A) Partial thickness ear burn
(B) Full thickness ear burn****Table 2. Type of surgery and percentage of recurrence of chondritis**

Type of surgery	Percentage
Stab wound drainage	100%
Limited excision	85%
Radical excision	10%

The patients were evaluated including the burned ear. In case of limited swelling, we incise

on it directly with radical cartilage and necrotic tissue excision while if the swelling is wide, bivalving incision (incision along the helical rim) with drainage of pus and radical excision of the infected necrotic cartilage (which is soft while normal cartilage feels granular) and other tissues (Figure 2), with irrigation of the cavity with normal saline and sometimes adding Gentamicin solution, and povidone iodine solution followed by inserting fine mesh gauze soaked with povidone iodine solution 10% then soft dressing with mild pressure and sending the pus for bacteriological study to differentiate the type of microorganism and its sensitivity to antimicrobial drugs.

**Figure 2. (A) Bivalving helical incision. (B) Bivalving /Radical excision**

Twenty four to forty eight hours later, the dressing and the mesh gauze removed after soaking with normal saline, irrigation with normal saline and mild squeezing and milking of the drained cavity, then insertion of another smaller piece of gauze and redressing for an