INTRODUCTION

Reconstruction of the auricle poses a great challenge in otologic field. It is owing to its 3-dimensional anatomical complexity. There are many surgical techniques used in reconstructing the auricular defect. We will be describing a versatile technique in reconstructing defect at lateral surface of the auricle following resection of basal cell carcinoma (BCC) at middle third of auricle using postauricular pull-through subcutaneous flap.

SURGICAL TECHNIQUE

STEP 1:
- Primary tumour was resected
- Frozen section was sent to ensure clear margins

STEP 2:
- Size of defect was drawn over the donor site at postauricular region

STEP 3:
- A window is created by removing strip of conchal cartilage
- Flap was tunnelled towards lateral surface of auricle via the window

STEP 4:
- Flap was accommodated to the contour of the defect

STEP 5:
- The donor site was closed primarily by means of T-plasty

STEP 6:
- The flap and donor site were closed by using non-absorbable sutures

OUTCOME

Post op 2 months...
The flap taken up and postauricular wound healed well

Post op 6 months...
The flap follows the contour of auricular cartilage

ADVANTAGES & DISADVANTAGES OF THIS PROCEDURE

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
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<tbody>
<tr>
<td>Single-stage procedure</td>
<td>Growth of hair at flap site</td>
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<td>Preserve contour of the auricle results in excellent cosmetic outcome</td>
<td>Possible complications such as chondritis and flap necrosis</td>
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<td>Choice to reconstruct large defect</td>
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<tr>
<td>Donor site can be closed primarily</td>
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CONCLUSION

Reconstruction of middle third of the auricle following excision of tumor needs meticulous surgical technique to ensure good result. Various surgical procedures had been described in the literature. Based on our experience, we would like to propose postauricular pull-through subcutaneous flap as a viable technique in reconstructing the middle third of auricular defect.