

Tilmelding af Foredrag

Foredragets titel

Infrahyoid lap til operation af større orale cancere

Forfatter(e)

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Afdeling/praksis

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Uddannelsesniveau

Speciallæge, overlæge

Introduktion

The infrahyoid flap is a myocutaneus pedicled flap nourished by the superior thyroid artery and vein. The flap consists of the sternohyoid and sternothyroid muscle and the skin island of about 7 by 4 cm in level 6. The flap can be transferred on its pedicle to the oral cavity after cancer ablation and reconstruct a medium size defect. The flap is versatile, reliable, and easy to harvest and oncological safe. The donor site can usually be primarily closed. This the first series about the infrahyoid flap in Scandinavia.

Materiale/metode

We reviewed a series of the first 6 patients operated in Rigshospitalet from February 2023 to October 2023 with defects from oral cancer surgery, who underwent infrahyoid flap reconstruction instead of a free flap. All patients had squamous cell carcinoma. The ages of the patients ranged from 64 to 91 years. All patients had T3 or T4a tumors in the floor of mouth, tongue or retromolar area. One patient had no lymph node metastasis. The rest of the patients had lymph node metastasis with extranodal extension. In 4 out of 6 we performed a pull through operation with removing the oral tumor together with the neck dissection level 1-3.

Resultater

No total flap necrosis was experienced. However, we experienced two partial skin paddle necrosis, because the fragile venous drainage. All donor sites were closed primarily without any tension. No patients needed tracheostomy. The nasogastric feeding tube was removed in all cases with restoration of oral intake in all cases. Five out of six had postoperative radiation therapy, with no flap problems. One patient died in the first year,

Diskussion

The infrahyoid flap is versatile, reliable, and convenient flap for repairing defects in the oral cavity with negligible donor site morbidity.

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