

ORAL CAVITY COMPOSITE RESECTION

A composite resection is the removal of part of the lining of the mouth and lower jaw. This operation is needed when a cancer has grown through the lining of the mouth into the jaw bone underneath. If cancer cells invade bone, they are very difficult to destroy with chemotherapy and/or radiation, so the cancerous bone must be cut out. The operation is called a “composite resection” because the tumor is composed of mouth lining and bone. The resected area then requires reconstruction of the removed area of bone.

PARTIAL RESECTION OF THE JAW

If the cancer has only invaded part of the way into the jaw, then it can be taken out and the jaw left intact. The area of the exposed bone is then repaired. In this situation, since the jaw is still intact, the hole in the jaw can be repaired by either a thick skin graft or with a piece of skin that is transferred from the forearm with its supplying blood vessels (a radial forearm free flap).

TOTAL RESECTION OF PART OF THE JAW

If the cancer has invaded all the way through the jaw, then that part of the jaw must be completely cut out. This type of defect or hole is more difficult to repair. In this situation, the jaw is now in two parts with a gap between them. If the gap is at the front or the side of the jaw, then the gap needs to be repaired with a piece of bone and skin, usually taken from the leg. The leg that the bone graft is taken from will take several months to heal. This process will usually start with physical therapy a few days into your hospital stay. You will need a walker for several days and may need a cane for a month or two.

POST-OPERATIVE CARE

Swallowing: Many times after extensive surgery, it is difficult to swallow. You may be temporarily dependent on a feeding tube, either through your nose or in your stomach, for nutrition. You will be seen by the speech pathologist to determine if you need any swallowing rehabilitation.

SPEECH

Initially, your speech may be affected (but should improve over time) due to a fair amount of swelling inside your mouth.

SWELLING

This is a temporary side effect of the surgery but may require you to have a tracheostomy in order to protect your airway. This tube is usually in place for approximately one week and may be removed prior to your discharge from the hospital.

If you have any questions or problems and it is during office hours (8:00 am-5:00 pm, Monday-Thursday) (8:00 am-4:00 pm Friday), please call our nurse at 205-801-7801, option 2.

After hours and weekends, page the ENT resident on call at 205-934-3411.