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- 44 Reitz Street, Somerset West, 7129

BChD (UWC), MBChB (UP), PDD (Oral Surgery) (UWC), MChD (Chir.Max-Fac.Med)(UP)

HPCSA Nr. DP0099856 | Practice Nr. 1140418

Parotidectomy and Salivary Gland Surgery

(Diagnosis: ICD-10: K11.2; D11.0, C07)

Salivary gland diseases that may require surgical intervention includes a wide range of conditions from infections, salivary stones, non-cancerous tumours, and salivary gland cancers.

Humans have three sets (six in total) of major salivary glands. The paired parotid. submandibular and sublingual salivary glands.

All three glands are anatomically closely related to important nerves in the mouth and check areas.

Loss of one or two of these glands rarely result in clinically significant dry mouth leading to difficulty in eating or speaking.

Complications

Below complications does not constitute an exhaustive list but does highlight some of the most common surgical complications. If you require more information, please ask your Maxillofacial and Oral Surgeon directly.

1. Nerve injuries (Approximately 5%)

Removal of a salivary gland may injure the following nerves. Most injuries are temporary, but some injuries may result in long term dysfunction:

Facial nerve (Movement of same side of face)

Lingual nerve (Numbness of same side of tongue)

Hypoglossal nerve (Movement of same side of tongue)

Other sensory nerves (Loss of feeling over neck / chin and lips / cheek and / or earlobe)

Facial nerve injury is most common with parotid gland surgery. This is because the main trunk of the facial nerve needs to be identified and carefully dissected out during parotid surgery.

The lingual, hypoglossal and one branch of the facial nerve (marginal mandibular) are at risk during submandibular gland surgery. This is particularly true for patients with longstanding infection of the gland or previous radiation therapy to the neck.

The lingual nerve is the only nerve at risk during sublingual gland removal.





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2. Major bleeding or Seroma (<1%)

Major bleeding is defined as bleeding that either requires blood transfusion or surgery to stop the bleeding. Seroma is an abnormal collection of tissue fluid that causes a swelling an may require surgical drainage.

3. Surgical Site Infection (3-5%)

Infections result in pain and swelling, mostly >7-days after surgery but it may develop weeks / months after surgery. We follow the American College of Surgeons Antibiotic prophylaxis protocol. Infections can be local and result in systemic infection with fever.

4. Frey Syndrome (5%) or Salivary Fistula (Rare)

Frey Syndrome results from abnormal healing of injured nerve ends overlying the skin of the parotid gland. It is related to parotid surgery only. The symptoms are cheek sweating when hungry and flushed skin over cheek. Salivary fistula results in salivary draining from pinpoint of skin where cut was made.

5. Scarring (<5%)

Scarring from head and neck cancer surgery is more common when patients develop infection after surgery, repeat surgery or receive radiotherapy after surgery.

6. Death (Rare)

Treatment Alternatives

1. Specific salivary gland diseases

Salivary duct surgery to remove accessible stones is possible in some patients. Sialo-endoscopy to break up and remove stones is possible in some patients. Extracorporeal lithotripsy is possible to break up some stones. Antibiotic therapy is possible for acute gland infections but not an effective cure for longstanding infections.

2. No treatment

Patients are entitled to deny any treatment.





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CONSENT						
I HAVE BEEN INFORMED OF THE POTENTIAL COMPLICATIONS, TREATMENT ALTERNATIVES AND BENEFITS OF AROTIDECTOMY AND SALIVARY GLAND SURGERY.						
MY RIGHTS AS A PATIENT ARE CONTAINED (NOT LIMITED TO) IN:						
SOUTH AFRICAN CONSTITUTION (1996); THE NATIONAL HEALTH ACT 61 OF 2003; CHILDREN'S ACT 2010.						
I ACKNOWLEDGE THAT I REMAIN ULTIMATELY RESPONSIBLE FOR THE COST OF THE ABOVE TREATMENT AS CONTAINED IN THE T&C OF THIS PRACTICE BILLING POLICY.						
I HEREBY GIVE MY CONSENT:			I AM: The patient	The parent/legal guardian		
SURNAME:		FULL NAMES:			☐ Mr. ☐ Mrs. ☐ Dr.	☐ Miss ☐ Prof. ☐ Mx.
BIRTH DATE:		•			•	
/ /			Sign Here			
WITNESS INFORMATION						
SURNAME:		FULL NAMES:			☐ Mr. ☐ Mrs. ☐ Dr.	☐ Miss ☐ Prof. ☐ Mx.
BIRTH DATE:						
/ /			Sign Here			