

Reconstruction of Scalp Defect for Patients with Scalp Tumours

Kalvis Pastars^{1,2}, *Janis Zarins*^{1,2}, *Juris Tars*³,
*Anna Ivanova*³, *Andrejs Skagers*⁴

¹ *Microsurgery Centre of Latvia, Department of Hand and Plastic Surgery*

² *Rīga Stradiņš University, Latvia*

³ *Oncology Centre of Latvia, Department of Head and Neck Surgery*

⁴ *Rīga Stradiņš University, Department of Oral and Maxillofacial Surgery, Latvia*

Introduction. Patients with large size tumour usually need wide excision with proper reconstruction of soft tissue of the scalp. Despite reconstruction of scalp defects has wide option list and usually can be done using local flaps, free flap sometimes is the only possibility to close the defect.

Aim, Material and Methods. 25 patients with large size tumour of the scalp, had excision of tumour with reconstruction of scalp with free flap. 7 patients had scalp involvement with part of face as well. One patient had tumour with brain involvement. Radial forearm flap was used in 6 cases, Anteriolateral thigh flap was used in 4 cases, latissimus dorsi flap with split thickness skin graft was used in 11 cases, scapular-parascapular or combined flap was used in 4 cases.

Results. All flaps survived. Generally there were no problems with vascularity of flaps. Small marginal necrosis with bone exposure was in one case. Two patients past away due to recurrence and dissemination of tumour. Free flaps provided proper coverage of scull in all cases. Esthetical results were satisfactory or good in all cases.

Conclusions. Reconstruction of scalp with local flaps still remains the first choice reconstruction method. It provides good functional and esthetical results. Scalp reconstruction with free flaps remains the last chance reconstruction method in cases when local flap is not an option. It provides good function and esthetical results, despite it is more demanding surgery.

Λ