

Oral Reconstruction with Free Lateral Arm Flap for Patients with Advanced Stage Oral Cancer

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Introduction. Radial forearm flap is a gold standard for oral soft tissue defect reconstruction after tumour ablative surgery of oral cancer in advanced stages. The main disadvantage of this flap is donor site morbidity.

Aim, Materials and Methods. The aim of this study was to show versatility of lateral arm flap in 34 cases with different oral defects that were reconstructed after tumour ablation, analyse complications and donor site morbidity.

34 patients with advanced stage oral cancer (T3 and T4) underwent tumour ablation with or without suspicious lymph node removal and with immediate reconstruction of oral defect with lateral arm flap. Analysis of complications and donors sites morbidity was carried out. Michigan Hand Outcome Questionnaire was used to evaluate functional and esthetical donor site outcome at least one year follow up.

Results. 31 patients had successful free flap surgery with uneventful post surgery period. Flap loss due to vascularity problems was indicated in one case (2.9%). Flap success rate was 97.1%. Donor site was closed primarily in all cases and healed uneventfully. Michigan Hand Outcome Score was average 94.30%.

Conclusions. Lateral arm is an excellent choice for oral reconstruction after ablative tumour surgery. It is versatile, safe and reliable for oral reconstruction with very good functional and esthetical donor site outcome.