



Dr. *Francis* T. Hall

EAR, NOSE, THROAT, HEAD & NECK

## Partial glossectomy care

Partial glossectomy is the name of the operation when part of the tongue is removed and is performed when there is cancer of the tongue. The amount of tongue removed depends on the size of the cancer. The cancer is removed with a 1 cm margin to ensure that all the cancer is removed. This leaves a defect in the tongue. If this defect is small then it can be closed with sutures (stitches) or left to heal (similar to the healing that occurs with a graze on the knee). If this defect is medium, then often some tissue from nearby can be rotated into the defect. If this defect is large, then tissue from the forearm (radial forearm free flap) is frequently used to close the defect. Usually, a partial glossectomy is combined with a neck dissection. A neck dissection is an operation where groups of lymph nodes are removed from the neck. (There is a separate care sheet for neck dissection).

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to feel better as quickly as possible.

### What to expect?

Your tongue will be sore and swollen for about two weeks. You will have difficulty swallowing and speaking. As the swelling goes down your swallowing and speech will improve. You will be in hospital between 2-10 nights. If you have a small tongue cancer, then it is reasonable to expect to go home in 2 days. If you have a large tongue cancer and require a lot of surgery, you will be in hospital between 7-10 days. Once you are eating and healing well you are safe to go home.

### How can you care for yourself at home?

#### Activity:

- Do not drive in the 24 hours following your surgery.
- Rest when you feel tired. Getting enough sleep will help you recover.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk.
- You will need to take 2-6 weeks off work. How long you will need to take off work depends on the extent of the surgery and your general health. If you have had a neck dissection, you will need about 3-4 weeks off work. If you have had a radial forearm free flap you will need about 6 weeks off work.
- If you require radiotherapy then you will need additional time off work towards the end of your 6-7 week course of radiotherapy and for about two weeks after completion of radiotherapy.
- In order to reduce the chance of bleeding, avoid strenuous activities, such as bicycle riding, jogging, weight lifting, or aerobic exercise, for 2 to 3 weeks or until Dr Hall says it is okay.
- Do not swim for one week.

## What should I eat after my surgery?

- Dr Hall will advise you when you can start eating. If the tongue is closed with sutures then you can start eating the following day under the guidance of the speech therapist. If tissue from your neck or forearm is used to closed the defect in your tongue, then tube feeding for one week is required until the tongue and the flap have healed. Tube feeding is through a tube that goes through one nostril and into your stomach (nasogastric tube / NG tube).
- If you require NG feeding then a dietician will oversee this to ensure that you are getting all the calories, protein, fat, carbohydrates, vitamins and minerals you need.
- A speech therapist will give you advice and exercises to help with both speaking and swallowing. Speech therapists are experts at swallowing rehabilitation. Most of the muscles used in swallowing are skeletal muscles and these muscles can be trained in the same way people train at the gym. Speech therapists are the physiotherapy equivalent for swallowing and speech.
- A dietician will advise you on your diet to ensure that you get enough calories and protein to heal well.

## Pain medicines:

- Dr Hall or his anaesthetist will prescribe several different medicines for the pain, from the following list: paracetamol (Panadol), ibuprofen (Brufen), celecoxib (Celebrex), Etoricoxib (Arcoxia), codeine, tramadol, gabapentin and Diffiam spray. Please take the medications as instructed. Some of the medications are taken regularly and some are taken for break through pain. Please text or call Dr Hall if the pain becomes too much. He can make changes to your medications that can make a big difference to your level of comfort.
- If Dr Hall prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.
- If you think your pain medicine is making you sick to your stomach:
  - Take your medicine after meals (unless Dr Hall has told you not to).
  - Ask Dr Hall for a different pain medicine.

## Problems:

- The main issues are speaking and swallowing problems. Dr Hall, the speech therapist and the dietician will ensure you get enough nutrition to heal well following your surgery.
- They will also assist you with advice on swallowing, speech and diet after you are discharged. Just like physiotherapy it is important you do daily swallowing exercises to improve your swallowing and speech.
- Occasionally food or liquids can end up in the lungs. This is called aspiration. It can cause a serious lung infection. If this happens you will need intravenous antibiotics and may need to be transferred to Auckland Hospital.
- Sometimes there can be healing problems. The bigger and more complex the surgery the more likely there are to be healing problems. Some patients have a lot of medical issues prior to surgery and these patients are more likely to have problems with healing. Healing problems will result in a longer hospital stay and you may require further surgery.

## When do I get my results?

- Usually, the pathologist sends a typed signed report to Dr Hall about one to two weeks after the surgery. Occasionally it may take the pathologist longer to issue a report either because of the complexity of your case or because of a higher than usual workload. Dr Hall will contact you by phone or text once he receives the pathologist's report in his inbox.

**Follow up appointment:**

- Dr Hall usually sees his glossectomy patients about 2 weeks after surgery. His secretary Rebecca will arrange your follow up appointment for you. If you have not heard from Rebecca within one week of your surgery, please contact her on 09 281 2963.

**Any problems call or text Dr Francis Hall on 021 733 677**

Dr.  T. Hall