



Dr. *Francis* T. Hall

EAR, NOSE, THROAT, HEAD & NECK

Transoral robotic surgery care

Transoral robotic surgery (TORS) involves using a surgical robot to remove tissue from the throat. The surgery is done to treat:

- Tonsil cancer
- Cancer of the back of the tongue (tongue base)
- Cancer of unknown primary (CUP). This is when there is cancer in one of the nodes in the neck, but the site where the cancer started is not known.

TORS is often combined with a neck dissection. There is a separate care sheet on neck dissection.

TORS can also be used to treat obstructive sleep apnoea (OSA) that has not responded to other treatments.

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?

You can expect to have a sore throat for about 2-3 weeks. Often the throat gets more sore about 6 days after the surgery. Often your ears hurt too. Ear pain is due to referred pain from the throat. There is nothing wrong with the ears, the brain just gets a little confused as to where the pain is coming from as the throat and the ear share the same nerve. Usually, the throat is more sore in the morning, when the throat is dry and you haven't taken your pain medication.

Most people have trouble swallowing following TORS. Controlling pain is very important as it is difficult to swallow when the throat is too sore. It takes a while to retrain the throat to swallow, but most people eventually swallow well. Your speech therapist will assess and advise.

Some people require feeding through a tube. Tube feeding is through a tube that goes through one nostril and into your stomach (nasogastric tube / NG tube). There is more on swallowing and tube feeding below. Expect to stay in hospital for 2-5 nights.

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 4 weeks off work.
- 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 two weeks.
- Do not fly, go boating or go anywhere remote for 14 days following surgery. If you bleed when you are away from access to medical care you are placing your life at risk.

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, morphine, 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.

Eating after TORS:

- The speech therapist will give you advice and exercises to help with both swallowing and speaking. 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 physiotherapists equivalent for swallowing and speech.
- Most people have trouble swallowing following TORS. Controlling pain is very important as it is difficult to swallow when the throat is too sore. Some of the throat muscles have been removed during your surgery. It takes a while to retrain the throat to swallow. This is where advice and exercises from your speech therapist can be very useful.
- A dietician will advise you on your diet to ensure that you get enough calories and protein to heal well.
- Some people require feeding through a tube. 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.

My throat looks white and horrible, is it infected?

- After a few days you may notice that there is pale grey stuff where your tonsils used to be. This is the throat's equivalent to a scab on your knee. It is normal and nothing to be alarmed about.

Bad breath

- It is not unusual to notice bad breath or an unusual smell or taste in the mouth for 2-3 weeks after your surgery.

Problems:

- Bleeding. If you bleed from either your mouth or nose, go to the emergency department. It is preferable to go to the emergency department at Auckland Hospital as they have an ENT registrar on site to deal with emergencies. Please note, neither Middlemore Hospital or Northshore Hospital have an ENT emergency service. Call Dr Hall on 021 733 677 as you are being driven into the hospital.
- Not many patients bleed, only about 2% but for that 2% it can be quite dramatic and frightening.
- High temperature. If you develop a high temperature (above 38 degrees Celsius) call Dr Hall on 021 733 677. Some liquid or even food may have gone into your lungs and you may have aspiration pneumonia, a nasty type of chest infection.

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 TORS 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 ten days 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