

Having surgery for head and neck cancer: radial forearm free flap

ENT & Maxillofacial Services

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Information for patients with head and neck cancer

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Introduction

This leaflet will help you to understand your treatment and answer any questions you may have. If you have any further questions not covered in this leaflet please ask.

What is a radial forearm free flap?

A radial forearm free flap is one of the ways of filling hole left behind following the removal of a cancer. It is one of the most common ways of replacing the tissue in the head and neck, particularly after a mouth cancer has been removed. It has the advantage of being able to replace large parts of the mouth. It does not tend to shrink down, so speech and swallowing are usually less affected.

What does the surgery involve?

A piece of skin will be removed from your inner forearm near your wrist. The skin and the fat layer (the **flap**) are removed along with two blood vessels, one which supplies the flap with blood (artery) and one which drains it away (vein). Once the flap of skin is removed it will be transferred and sewn into the hole created by the removal of your cancer. The blood vessels are then attached to blood vessels in your neck. These blood vessels then keep the flap alive whilst it heals. The hole in your forearm made by removing the flap is covered with a graft of skin. This may be taken from either your upper arm or your abdomen.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What can I expect after my operation?

Your arm will be in a bandage for around ten days. This will then be removed and replaced by a much lighter dressing. The vessels that were removed with the flap run up as far as your elbow so you will have stitches in your arm to this point. These will be removed after ten days. The nerve which supplies feeling to the base and side of the thumb can be bruised during surgery which means this area can remain numb or tingly for a few months after surgery. You may also notice that your hand does not feel as strong as before and it may feel more cold in the winter.

What are the possible complications?

As with any operation, there are possible complications. With this type of surgery, however, complications are rare and may not happen to you. They include:

- **Infection** - you will be given antibiotics through your vein during surgery and possibly for a few days after your operation. Therefore infections are not normally a problem.
- **Flap failure** - in 2 to 5% (between two and 5 out of 100) of cases one of the blood vessels draining or supplying the flap may develop a blood clot. This means that the flap would either not get any blood supply or would be unable to drain the old blood away leaving the flap congested. If this occurs it usually happens within the first 48 hours and would mean another operation to remove the clot. Occasionally removing the clot is not successful and the flap 'fails'. This would mean the flap needs to be removed and an alternative method of reconstruction used.

Contact numbers

If you have any further questions please contact the Macmillan clinical nurse specialists (key workers) on:

Telephone: 0116 204 7829 (office)

Mobile numbers: 07960 500043 or 07950 967983

Monday to Friday 8am to 4pm.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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