

Extra-capsular Dissection of Benign Parotid Tumors: Is It Safe and Adequate?

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Abstract

The majority of parotid tumors are benign, for such cases the surgical treatment has been debated for decades due to the compromise between adequate tumor excisions with minimal morbidity. Extra-capsular dissection (ECD) can be an alternative approach for selected cases with low recurrence rate and significantly reduced morbidity. Fifty patients with benign parotid tumors were subjected to ECD and followed up for at least 12 months after surgery for recurrence and functional outcomes that included facial nerve injury, symptomatic Frey's syndrome, ear numbness and salivary leak. 16 (32%) patients were female and 34 (68%) were males with mean age was 51.6 years and mean follow up period was 26.4 months, histo-pathological examination revealed that 44 (88%) tumors were pleomorphic adenoma and 6 (12%) were Warthin's tumor. 1 (2%) patient complicated with hematoma, 1 (2%) with sialocele, 1 (2%) with transient facial nerve paralysis (TFNP) and 2 (4%) patients with transient ear numbness, No patients developed Frey's syndrome or permanent facial nerve paralysis (PFNP). The tumor recurred in 1 (2%) patient 10 months after ECD. ECD is a safe and simple technique with lower rate of complications than the alternative surgeries provided that the surgeon is well trained and has good experience with this technique.