



HEAD & NECK CANCER
AUSTRALIA
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MANDIBULAR LINGUAL RELEASE



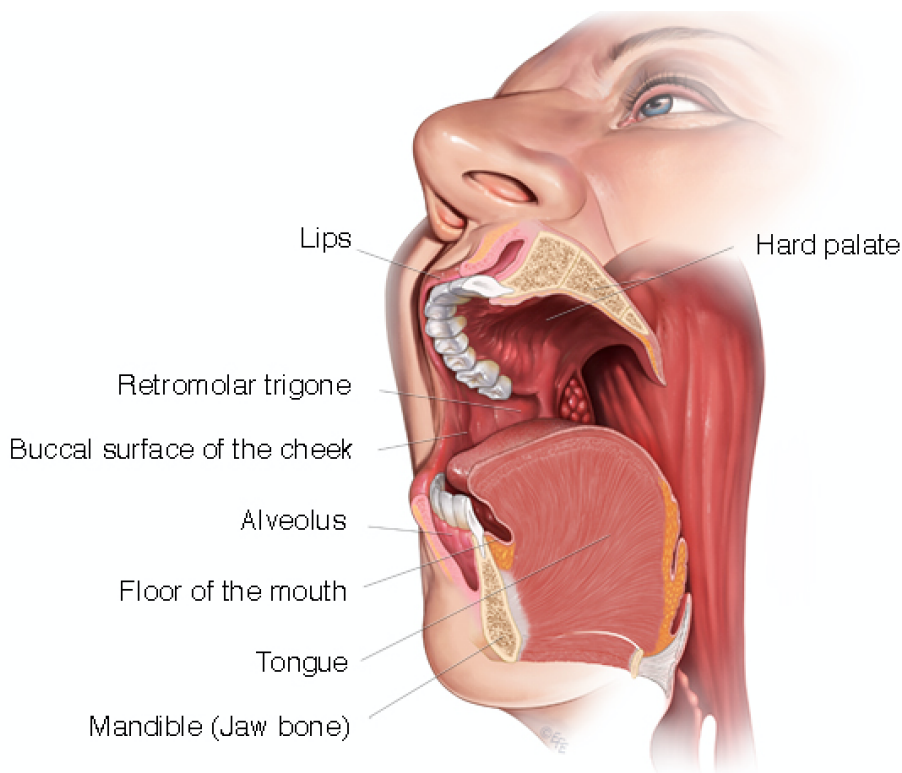


MANDIBULAR LINGUAL RELEASE

This information aims to help you understand the operation, what is involved and some common complications that may occur. It may help answer some of your questions and help you think of other questions that you may want to ask your cancer care team; it is not intended to replace advice or discussion between you and your [cancer care team](#).

AN OVERVIEW TO THE MANDIBULAR LINGUAL RELEASE APPROACH

- The lower jaw or jawbone forms the mandible; it is the largest, strongest and lowest bone in the face (see picture below).



- The mandibular lingual release approach is used to access and remove cancer in areas such as the mouth, including the tongue and the part of the throat located just behind the mouth called the oropharynx. Removal of cancers from the tongue is called a [glossectomy](#) and removal of cancers from the oropharynx is called an [oropharyngectomy](#). You may want to download information on



glossectomy and oropharyngectomy, which is available on the [Head and Neck Cancer Australia website](#).

- The mandibular lingual release is usually performed together with removal of the lymph glands from either one or both sides of the neck. This is called a neck dissection. You may want to download information on [neck dissection](#), which is available on the [Head and Neck Cancer Australia website](#).
- It involves a cut or incision across the upper part of the neck and another cut inside the mouth. When the mandible is pulled up, the floor of the mouth and tongue can be dropped down to allow easier access to the throat through the neck.
- After the cancer is removed, reconstructive surgery is usually done to repair the area. The tongue and floor of mouth will be placed back inside the jawbone.
- A temporary breathing tube will be placed in the windpipe called a [tracheostomy](#). This is used to avoid problems with breathing due to swelling after the surgery. When the swelling goes down the tube will be removed. You may want to download information on tracheostomy, which is available on the [Head and Neck Cancer Australia website](#).
- The cut inside the jaw bone will be sutured; you will not be able to eat for about a week after the surgery. A feeding tube will be placed through the nose to the stomach to keep you well-nourished during this time. The tube will be removed when you are eating well enough again but you go home you will probably only be eating puree or soft food for some time. You may want to download information on feeding tubes, which is available on the [Head and Neck Cancer Australia website](#).

Visit the [Head and Neck Cancer Australia website](#) to download information about different reconstructive surgeries

WHY IS MANDIBULAR LINGUAL RELEASE APPROACH NEEDED?

The mandibular lingual release approach:

- provides access to remove cancers in the mouth and throat without cutting through the jawbone
- helps the surgeon have better access to the cancer so it can be removed more safely



- has less side effects for removing cancers from the mouth and throat, such as pain, scarring of the face, and effects on chewing and swallowing than other techniques such as mandibulotomy.

Further information regarding [mandibulotomy](#) is available on the [Head and Neck Cancer Australia website](#).

HOW TO PREPARE FOR THE OPERATION

BEFORE THE OPERATION:

- You will need to fast (have nothing to eat or drink) for 6 hours before your operation (unless advised differently by your surgeon or anaesthetist) because the mandibular lingual release approach is performed under a general anaesthetic (you will be asleep and will not remember what happens during the operation). Your cancer specialist and anaesthetist will explain reactions to anaesthetic.
- Your surgeon will explain the details of your operation. Be sure to bring up any questions or concerns, and share your needs and wishes with your cancer care team.
- Talk to your surgeon and cancer care team about any likely side effects you can expect following the operation. The approach may cause changes to your appearance and a loss of sensation in some of the nerves of your tongue, neck and face.
- You may find it useful to talk to a dietitian, speech pathologist or specialist head and neck nurse about these issues.

Visit the [Head and Neck Cancer Australia website](#) for information about the specific operation your surgeon has recommended for your cancer and about reconstructive surgeries, including what to expect during and after surgery.

POSSIBLE RISKS OF MANDIBULAR LINGUAL RELEASE

Your doctor will explain details of the operation, general risks and side effects of the operation, they may recommend:

- stopping smoking before the operation
- stopping blood thinners (e.g. aspirin) before surgery to reduce the risk of bleeding
- a blood thinner (called heparin) may be injected before and after surgery to reduce the risk of blood clots
- antibiotics to reduce to risk of wound infection
- early mobilisation to reduce the risk of blood clots and chest infection
- special stockings to reduce the risk of blood clots.

There are some specific risks of mandibular lingual release approach. These include:

- **Infection:** The mouth has lots of bacteria. These bacteria can cause an infection in the neck wound after the surgery. Antibiotics are given during surgery and for a day or so after, but infections can still happen. This might require opening part of the wound to allow any pus to drain out.
- **An abnormal opening or fistula:** If the seal separating the throat from your neck breaks down, saliva can leak causing an infection. This is called a fistula. It can be a very serious complication and might require opening a wound to allow it to drain or return to the operating room to fix the seal.
- **Flap failure:** If reconstructive surgery with a flap is needed, then microsurgery is done to join blood vessels together that keep the flap alive. If the blood supply blocks, you will be taken back to the operating room to fix the problem. Sometimes the problem cannot be fixed and a new flap is needed.

SIDE-EFFECTS AND THEIR MANAGEMENT

As with all operations, there is a chance that mandibular lingual release may lead to a number of side effects. You may not experience all of the side effects. Speak with your doctor if you have any questions or concerns about treatment side effects.

Side effects common for mandibular lingual release approach may include:

- **Nausea:** General anaesthetic may cause nausea. This will settle down soon after the operation and can be treated with medications.
- **Pain management:** Pain is a common side effect of the operation. Your anaesthetist will give you pain medicine during the operation to keep you comfortable when you wake up, and you may continue on pain medicines to ensure pain is under control. Ensure you take pain relief medications as prescribed by your doctor and speak to your cancer care team if the pain is not under control, gets worse or if the medication causes any side effects. You may want to download information on pain management, which is available on the [Head and Neck Cancer Australia website](#).
- **Changes in appearance:** The appearance of the face and neck may change and it may be hard to accept. Seek support from the cancer care team, and family and friends. Contacting other patients may also assist.
- **Nerve damage:** Occasionally, some of these nerves are injured or need to be removed during the operation. It may cause a loss of sensation in part of the face, neck and tongue.
- **Changes in eating and speaking:** Mandibular lingual release may affect eating and speaking so it may be useful to have a tablet/portable device or pen and paper to write down what you want to say. The speech pathologist and dietitian will provide any assistance needed to help with your speaking and eating during recovery.

Ask your doctor or visit the [Head and Neck Cancer Australia website](#) for information about side effects of the specific operation that your surgeon has recommended for your cancer.



You may want to write additional questions here to ask your doctor or cancer care team

About Head and Neck Cancer Australia

Head and Neck Cancer Australia (formerly Beyond Five) is Australia's only charity dedicated to providing information and support to people living with head and neck cancer, caregivers, family and healthcare professionals.

Head and Neck Cancer Australia's mission is to improve the quality of life of everyone affected by head and neck cancer through education and access to support and to raise awareness of head and neck cancer nationally.

Head and Neck Cancer Australia supports people through their cancer journey, from diagnosis to treatment and life after cancer by providing comprehensive, easy to understand and easy to access information. We have the only Directory of Head and Neck Cancer services and support groups available in Australia and New Zealand helping people to find the right services and support when they need it most.

Phone: 1300 424 848

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Web: www.headandneckcancer.org.au

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First Published: 2016

Last updated: November 2020