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REMOVAL OF SUBMANDIBULAR SALIVARY GLAND

This leaflet has been designed to improve your understanding of your forthcoming treatment and contains answers to many of the common questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask a member of the medical staff.

What is the submandibular gland?

The submandibular gland is a salivary gland about the size of a plum that lies immediately below the lower jaw. Saliva drains from it through a duct that opens on the inside of the mouth under the tongue immediately behind the lower front teeth. The most common reasons for removing a submandibular gland include blockage (often by stones) or tumours within the gland.

What does the operation involve?

The submandibular gland is removed under a general anaesthetic, ie you are put to sleep completely. The operation involves a cut around two inches long (5cm) in the upper part of the neck just below the jaw line. Once the gland has been removed the incision is repaired with stitches. These are usually self dissolving. At the end of the operation a small tube may be placed through the skin into the underlying wound to drain any blood which may collect. This is usually removed on the morning following surgery.

Will anything else be done while I am asleep?

If your gland is being removed because of infection that is caused by a stone it may also be necessary to make a cut inside the mouth to remove that stone.

How long will the operation take?

The length of time depends upon the degree of difficulty. An uncomplicated procedure will typically take around 45 minutes to an hour to complete. More time is required in some cases.

What can I expect after the operation?

You may require a night in hospital following the surgery. It is unlikely to be very sore but regular painkillers will be arranged for you. There is usually relatively little swelling following submandibular gland removal.

Do I need any time off work?

It is usually advisable to take a week off from work to recover following this surgery. During this time you should avoid strenuous activity.

Is there anything that I need to do when I get home?

It is important to keep the wound clean and dry for the first week following surgery. This obviously means you need to take care when washing or shaving.

Will I have a scar?

All cuts made through skin leave a scar but the majority of these fade with time and are difficult to see when they are fully healed. It may take several months for your scar to fade but eventually it should blend into the natural folds and contours of your neck.

What are the possible problems?

- Bleeding from the wound is unlikely to be a problem. If it occurs it usually does so within the first 12 hours of surgery which is why you need to stay in hospital overnight.
- Infection is uncommon but if your surgeon thinks it may happen to you a short course of antibiotics will be prescribed.

The surgeon tells me that damage to nerves is possible. What does this mean?

There are three nerves that lie close to the submandibular gland that can be damaged during its removal. Most nerve damage occurs as a result of bruising or stretching of the nerves as it is necessary to hold them out of the way and protect them during surgery. If

nerve damage occurs it is usually temporary. There are three nerves that can be injured all with varying results:

- Weakness of the lower lip - a lower branch of the facial nerve is the nerve most likely to be injured in the removal of a submandibular gland. If this occurs it affects the movement of your lower lip, leading to a slightly lopsided or crooked smile.
- Numbness of the tongue - the lingual nerve is rarely injured as it is large and usually easy to identify. Since it is the nerve that supplies feeling to the side of the tongue bruising results in a tingly or numb feeling in the tongue, similar to the sensation after having an injection at the dentist. This can also affect taste.
- Restricted tongue movement - the hypoglossal nerve is only very rarely injured. It is a nerve that makes the tongue move and damage can therefore result in a decrease of tongue movement.

Is permanent nerve damage possible?

The majority of damage to nerves is temporary although it can take several months for them to recover. Permanent damage is possible and usually occurs in only the most difficult cases.

If a salivary gland is removed will I be left with a dry mouth?

The removal of one submandibular gland will not have an impact on the amount of saliva that you produce. There are many other salivary glands left in and around the mouth that will still keep it moist.

For further advice and information please see the web pages of The British Association of Oral & Maxillofacial Surgeons www.baoms.org.uk