



Simultaneous double free flap reconstruction in patients with advanced oral squamous cell carcinoma: A case series and analysis of patient survival

Jimmy Kayastha
USA

Abstract:

Background: The purpose of this study was to assess the effect of free-flap reconstruction of patients with advanced stage IV oral squamous cell carcinoma following ablative tumor resection. The purpose of this study is to elucidate the reconstructive indications of the use of simultaneous double free flaps in head and neck oncological surgery.

Method: The study was based on a retrospective cohort of 76 patients with pathological stage IV OSCC patients (without distant metastasis) treated by tumor ablation with free flap reconstruction. Of the 76 patients, 49 (Group 1, Test) underwent surgical reconstruction with microvascular tissue transfer and in 27 (Group 2, Control) only local or regional flaps were used. Fibula osteo-cutaneous free flap was used in association with forearm free flap in 18 cases, fibula osseous-forearm in 7 cases, fibula osseous-rectus abdominis in 1 case, iliac crest-forearm in 1 case. Forearm free flap was used for intra-oral reconstruction in all cases. We compared patient survival and cancer recurrence rates between these two groups.

Result: Despite the unfavorably expected prognosis in group 1, both positive margin rate (12.2% in Group 1 versus 21.5% in Group 2, $P = 0.112$) and cancer recurrence rate (26.6% in Group 1 versus 28.3% in Group 2; $P = 0.671$) were not significantly different between the two groups. At the end of the follow-up period, 23 (47%) and 33 (67.3%) patients had died of oral squamous cell carcinoma in the microvascular reconstructive and control group, respectively. In the free-flap group, the mean and median survival time was 54 months. **Conclusion:** Patients with free-flap reconstruction of surgically created defects after oral cancer resection showed a trend toward better 5-year survival. Simultaneous free flap reconstruction, in massive oro-mandibular defects, represents in some selected patients, a good choice to achieve satisfactory aesthetic and functional results.



Biography:

Jimmy Kayastha (U.S. NPI 1073704615) graduated from Nova Southeastern University, Florida, where he completed his Post-Graduate Residency in Advanced Education in General Dentistry (AEGD I and II). He completed his General Practice Residency at Miami Valley Hospital, Ohio, Oral Medicine Residency at Carolinas Medical Center, North Carolina and Glasgow Dental Hospital, United Kingdom. He then completed his Surgical Fellowship from America's second best hospital, The Cleveland Clinic and Maxillofacial Pain Fellowship from Walter Reed National Military Medical Center, best known as the U.S. President's Hospital. Dr. Kayastha is board certified and has over a decade of experience in the U.S. He has served as the Director, AEGD Residency Program and U.S. NIDCR funded Post-Doctoral Research Scientist at The Marshfield Clinic, Wisconsin; Adjunct Clinical Faculty at Case Western Reserve University and University of California, San Francisco. He served on the Executive Leadership Board, International Society for Quality and Safety in Healthcare in London, England and was recognized in the 2018 Edition of Marquis Who's Who in America in the field of Medicine and Healthcare.

Publication of speakers:

1. Jimmy Kayastha et al. A retrospective, cohort study of the prevalence and risk factors of oral burning in patients with dry mouth. *Oral Surg Oral Med Oral Pathol Oral Radiol Endod.* 2011 Jun;111(6):720-5.

Webinar on Dental Health | July 17, 2020 | London, UK

Citation: Jimmy Kayastha; Simultaneous double free flap reconstruction in patients with advanced oral squamous cell carcinoma: A case series and analysis of patient survival; Dental Health 2020; August 31, 2020; London, UK