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Multi centre experience of extracapsular dissection of benign parotid neoplasms

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Introduction: Extracapsular dissection (ECD) has been shown to be effective in the surgical treatment of pleomorphic adenomas¹ but the outcome of the study was attributed to just two surgeons with extensive experience of the technique and a special interest in parotid surgery. The question is whether the technique can be adopted effectively by other surgical teams.

Method: Data on ECD were updated by inclusion of cases treated at University Hospital of South Manchester and Christie Hospital (380), Wythenshaw Hospital Manchester (75), University Department of ENT Surgery Erlangen ($N=210$) and Guy's Hospital London ($N=148$). The follow-up period ranged from 1 to 71 months. Surgical morbidity was measured by the incidence of facial nerve injury, tumour rupture, Frey's syndrome and recurrence of the tumour. These data were compared to that reported in the original study.

Results: There was no significant statistical difference in results between the two data sets

Conclusion: Follow up was limited in this study with regard to the incidence of recurrent disease. This study demonstrates that extracapsular dissection is a technique that can be taught to surgeons with an interest in parotid surgery.

Reference

1. McGurk M, Renehan A, Gleave EN, Hancock BD. Clinical significance of the tumour capsule in the treatment of parotid pleomorphic adenomas. *Br J Surg* 1996;**83**:1747-9.

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