

What if I don't have the treatment?

Metastatic neck cancer can be life threatening if left untreated.

Who can I talk to if I have questions?

Please find some useful contact numbers:

ENT consultant :	Mr Reddy	01872 255087
ENT consultant :	Ms Grobbelaar	01872 255087
Oral & maxillofacial surgeon :	Ms Perera	01872 253727
Oral & maxillofacial surgeon:	Ms Shaikh	01872 253984
Oncologist :	Dr Collinson	01872 258303
Clinical nurse specialists:		01872 253475

Further information

If you need further information, or have any problems please contact
Wheal Coates ward on: 01872 253830/ 253832

Information, advice and support is also available from:

www.macmillan.org.uk

www.cancerresearchuk.org

If you would like this leaflet in large print, braille, audio version
or in another language, please contact the General Office on
01872 252690



Neck dissection surgery



What is a neck dissection?

A neck dissection is an operation to remove lymph nodes in the neck that may contain cancer. This may be called metastatic neck cancer.

What is metastatic neck cancer?

This occurs when a head and neck cancer such as laryngeal, oral or salivary gland spreads to the lymph nodes in the neck.

What are the symptoms?

The most common symptoms are one or more lumps in the neck, or there may be no symptoms at all.

How is it diagnosed?

A doctor will examine your mouth, throat and neck using a light and possibly a flexible nasendoscope (a small bendy tube with a camera on the end). The doctor will also ask about the history of your symptoms and the general condition of your health.

How can it be treated?

You will receive one of the following treatments:

- Surgery to remove the cancer
- Radiotherapy, using X-rays to kill the cancer cells
- Chemotherapy, using drugs to kill the cancer cells
- Or, a combination of the above.

Why do I need treatment?

Metastatic neck cancer can be life threatening if left untreated. The symptoms will increase gradually, severely affecting your daily life.

What does the treatment involve?

Surgery - This is often used to remove the cancer, the lymph nodes and possibly the surrounding tissue or muscle. This will involve operating on your neck. Your doctor will explain (in detail) about the operation needed to treat your cancer.

Radiotherapy - This involves receiving X-ray treatment every week for between four to seven weeks. A mask of your head and neck is made to ensure the treatment is given to exactly the same area every day.

Chemotherapy - This is usually given in intravenous form, but may occasionally be given as tablets.

The medication travels around your body, killing the cancer cells.

What are the possible complications?

Pain, numbness, infection and restricted shoulder, arm and neck movement. These symptoms are usually minor and improve after your first treatment. Occasionally, some may be permanent. Treatment is available for most complications and your doctor will discuss this with you if necessary. Persistent leakage of straw-coloured or milky fluid known as a chyle leak which may require a special diet and further surgery.

What can I expect after my operation?

You may need to spend a few days in hospital. A drain may be inserted into your wound to prevent swelling; this will probably be removed the day after your operation. There may be some stitches or clips in your wound; the practice nurse usually removes these at your GP surgery after a week.

The area of your operation may be painful for several weeks and you should stock up on simple painkillers that you can buy over the counter that you can take after you have been discharged. You will probably need to take about two weeks off work.

You will also be given an appointment to come to the outpatient department to receive the results of your operation.

What is my expected outcome?

The doctor in the outpatient department will be able to discuss the outcome of your treatment and explain if any further treatment is required. All head and neck cancer patients are routinely followed-up for five years to make sure that if their cancer returns it is found and treated quickly. If your cancer has not returned within this time you may be discharged.