



## Scapula flap

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### What does the surgery involve?

Your surgeon will take a piece of bone from your shoulder blade (scapula bone). Part of the scapula bone and overlying skin, most of the time, (the flap) is removed along with two blood vessels, one of which supplies blood to the flap (the artery) and one of which drains blood from it (the vein). Once the necessary piece of bone from the shoulder blade is removed it is transferred to the head and neck and secured in position with small plates and screws. The blood vessels supplying and draining the flap are then joined to blood vessels in your neck under a microscope. These blood vessels then keep the flap alive while it heals into its new place. What happens to the 'hole' in the shoulder blade? The hole in the scapula bone that is left after the flap is removed is left to heal on its own. It takes several months for the shoulder blade to heal completely but at the end of this time it will be as strong as it was before the surgery.

### What can I expect after the operation?

The area of your shoulder where the bone has been removed is likely to be sore. Regular painkillers will be arranged for you. A small tube is also placed through the skin into the underlying wound to drain any blood that may collect. This 'drain' is usually removed after a few days.

### Will I have a scar?

All cuts made through the skin leave a scar but the majority of these fade with time. The scar on the back of your shoulder blade is usually several inches long.

### What are the possible problems?

There are potential complications with any operation. Fortunately, with this type of surgery complications are rare and may not happen to you. However, it is important that you are aware of them and have the opportunity to discuss them with your surgeon.



Bleeding – since a ‘drain’ is inserted into your shoulder wound, bleeding is unusual.

Infection – you will be given antibiotics through a vein whilst you are asleep during surgery and in the early period after surgery. Surgical site infections occur in approximately 1: 5 patients as a general rule.

Numbness – occasionally a patch of skin over the back of your shoulder will feel numb and tingly after the operation. This numbness may take several months to disappear and in a minority of patients may last forever.

Shoulder movement–You may find that your shoulder movements are restricted after surgery but this is often due to swelling, the position of any drains and the clips in your skin. Gentle exercise will also help to reduce any swelling in the area and help prevent shoulder and neck pain and stiffness.

Flap failure – in two to five percent of cases one of the blood vessels supplying or draining the flap can develop a blood clot within it. This means that the flap doesn’t get any fresh blood or, if the drainage vein clots, then the flap becomes very congested with old blood. If this occurs it usually happens within the first two days and means that you will have to return to the operating theatre to have the clot removed. Removing the clot is not always successful and on these occasions the flap ‘fails’ and an alternative method of reconstruction sought.

### **What exercises should I be doing?**

Most patients benefit from simple exercises. Following a scapula free flap, it is important to keep your shoulder and shoulder girdle moving. Your Physiotherapists will encourage you to start exercising.