

REKONSTRUKCIJA POSTOPERATIVNIH FARINGOKUTANIH FISTULA DUPLIM OSTRVASTIM PEKTORALIS MAJOR MIŠIĆNO-KOŽNIM REŽNJEM

RECONSTRUCTION OF POSTOPERATIVE PHARYNGOCUTANEOUS FISTULAS WITH DOUBLE ISLAND PECTORALIS MAJOR MYOCUTANEOUS FLAP

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Kratak sadržaj

Zatvaranje (PFKF) postoperativnih faringokutanih fistula, nastalih posle totalne laringektomije zbog karcinoma larinksa, kod prethodno radioterapijski tretiranih bolesnika, predstavlja ozbiljan problem u rekonstruktivnoj hirurgiji.

U ovom radu prikazana je mogućnost primene duplog ostrvastog pektoralis major mišićno-kožnog režnja, za rekonstrukciju postoperativnih faringokutanih fistula.

U periodu od 1997. god. do 2001. god. na ORL klinici u Nišu operisano je 124 bolesnika zbog malignog tumora larinksa a ukupan procenat PFKF iznosio je 13,71%. Kod 5(6,2%) bolesnika postoperativno su nastale velike (prečnika preko 3cm) postoperativne faringokutane fistule. Kod ovih bolesnika je rađena dvoslojna rekonstrukcija PFKF duplim ostrvastim pektoralis major mišićno-kožnim režnjem.

Primena ovakvog režnja je uspešnija od primene pektoralis major mišićno-kožnog režnja prekrivenog autotransplantatom kože, jer obezbeđuje kvalitetnije dvoslojno zatvaranje fistule, a postoperativna nega je daleko jednostavnija.

Ključne reči: laringektomija, faringokutana fistula, režanj, dupli, ostrvasti, pektoralis major

Abstract

Reconstruction (PPCF) of postoperative pharyngocutaneous fistulas, that occurred after total laryngectomy due to larynx carcinoma, in previously irradiated patients, presents a serious problem in reconstructive surgery.

In this paper we demonstrated the possibility of application of double island pectoralis major myocutaneous flap, for reconstruction of postoperative pharyngocutaneous fistulas.

In period from 1997 to 2001, we operated 124 patients for malignant laryngeal tumor and the total number of PPCF was 13.71%. Five (6.2%) patients presented large (3cm in diameter) postoperative pharyngocutaneous fistulas. In these patients, a double-layer reconstruction of PPCF was performed by means of double island pectoralis major myocutaneous flap.

The application of this flap is more successful than the application of pectoralis major myocutaneous flap, covered by skin autotransplant, because it provides better a double-layer closure of the fistula, and postoperative care is much simpler.

Key words: laryngectomy, pharyngocutaneous fistula, double, island, pectoralis major