

Submental Flap in Reconstruction of the genial region after wide Surgical Resection of nodular basal cell carcinoma

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Introduction

- Basal cell carcinomas (BCCs) are the most common type of skin cancer. It has various histopathologic subtypes.
- Metastasis of BCCs are exceptional, however, these tumors are locally aggressive which often causes serious aesthetic issues and high morbidity rate.
- Surgical resection is considered the gold standard for BCCs (1). Reconstruction of the skin defect is usually needed.
- The submental flap (SF) was first described by Martin in 1993, inspired by platysma flaps (2), since then it has been incorporated into reconstruction of numerous defects in head and neck surgery
- The SF is useful for reconstruction of the oral cavity and lower face defects. It is based on the submental artery and the facial vein.
- The SF offers a shorter operative time than free flaps and has less donor-site complications (3).
- Its main advantages are its simplicity, the wide arc of rotation that allows an easier manipulation, and the similarity of the flap's texture and color to the facial skin
- SF limitations include possible harvesting of level I lymph nodes while performing neck dissection (4)

- Tumor description:** It was an ulcerating tumor of right lower cheek measuring 3 cm in its greatest dimension (figure1).
- Tumor excision:** The tumor was excised with a 1 cm margin of healthy tissue, extending to the lower buccal mucosa. This latter was free from disease (figure 2)
- Reconstruction time:** A cutaneous submental paddle of the required size was marked (figure 1). Subplatysmal dissection began from the contralateral side to the tumor and was extended toward the midline. The ipsilateral anterior belly of the digastric and mylohyoid muscles were harvested with the skin paddle. The facial artery, the facial vein and the left marginal mandibular branch of the facial nerve were preserved. The SF was then delivered to the defect and sutured. The donor site was closed by direct suture (figure 3)
- No intraoperative or postoperative complications occurred. Aesthetic results were acceptable.



Figure1: Lower genial region ulcerous lesion

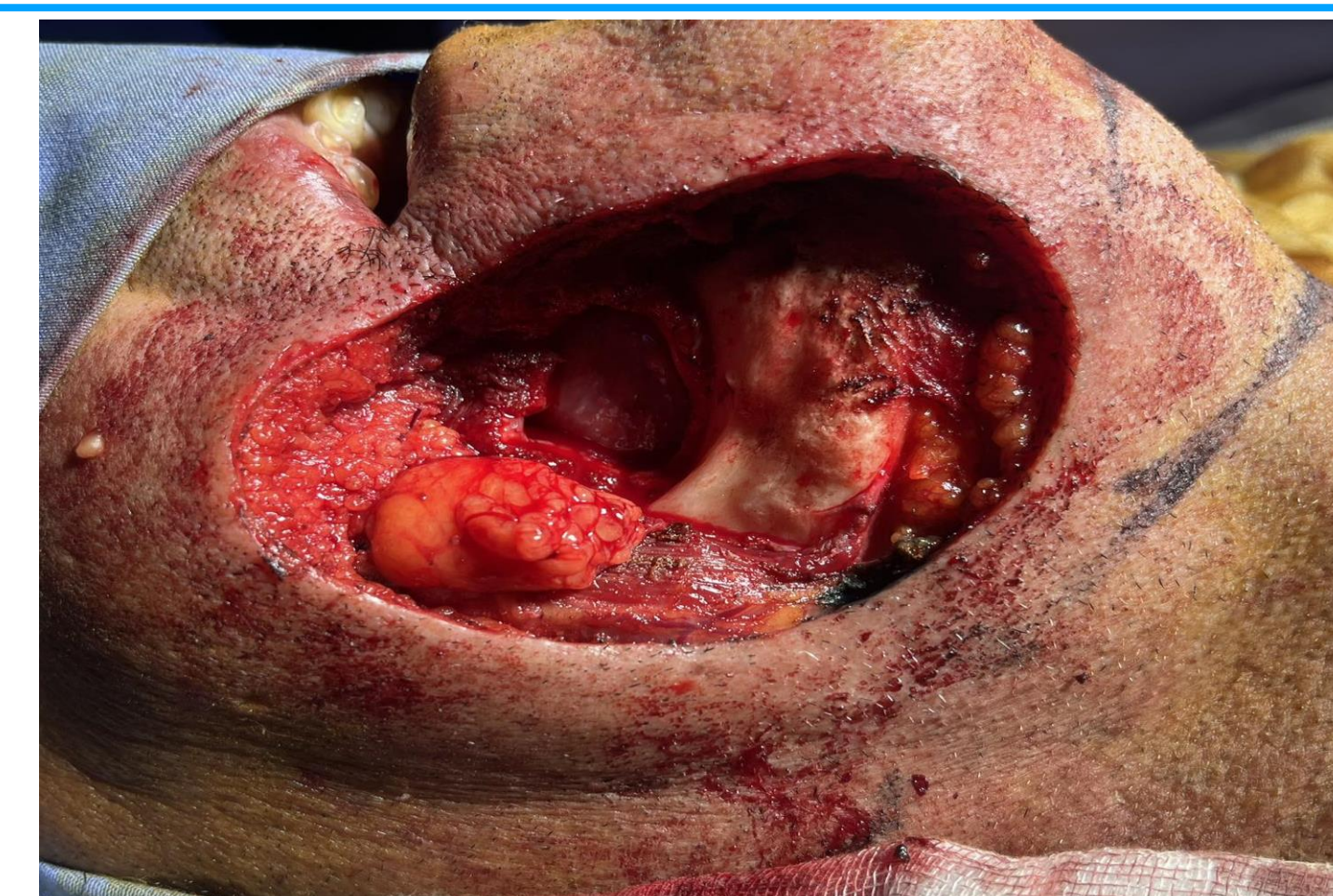


Figure 02 :Large tumor excision



Figure 3 : defect reconstruction

AIM

Our objective was to present the technical aspects of SF and to evaluate its outcomes.

Conclusion

The submental flap (SF) is valuable in head and neck surgery, offering shorter operative times, fewer donor-site issues, and acceptable cosmetic outcomes. However this flap could not be used simultaneously to level I lymphnode dissection.

Methods and Materials

We report the case of a 60-year-old male patient, with no particular medical history, treated for lower cheek nodular BCC by surgical resection and reconstruction of the skin defect by pedicled SF

References

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