



# Maxillectomy

A surgeon removes all or part of the midface maxillary bone (upper jaw) depending on the extent of tumors of the hard palate, maxillary sinus, or maxilla.

## Before Surgery

You will receive specific instructions from your physician for how to appropriately prepare for the procedure, such as when to arrive and food/drink restrictions. A few days before your operation, the anesthesiologist will ask you a few questions so that they can create a comprehensive anesthesia plan based on your medical history. On the day of your surgery, you will arrive at the hospital a few hours before your scheduled procedure. The nurses, anesthesiologist, and head and neck surgery team will check in with you. If you have any last minute questions, this is a good time to ask them.

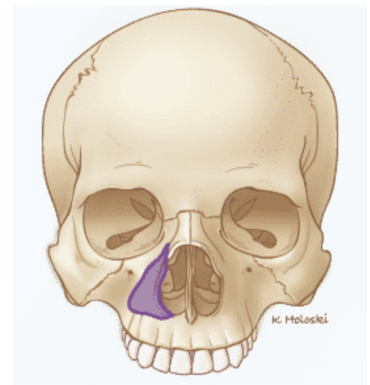
## The Surgery

A tracheostomy may be performed to make sure you can breathe after surgery. This is usually temporary and will be removed before discharge from the hospital.

Multiple approaches exist for the maxillectomy procedure depending on the location, size, and extent of the tumor:

**Medial Maxillectomy:** In this procedure, a portion of the maxilla directly next to the nose is removed, but the eye and hard palate remain intact (see image to the right). This is done using either an open incision or an endoscope inserted through the nose. Major reconstruction is not generally required after this surgery.

**Infrastructure Maxillectomy:** Infrastructure maxillectomies require the removal of the hard palate, lower maxilla, and some teeth. The bone under the eye, however, is kept intact. You may require a dental prosthesis after surgery to restore your ability to speak and



Please note that this information is intended for educational purposes. It does not replace consultation with your doctor, and it should not be interpreted as medical advice. We encourage you to speak to your health care provider if you have further questions or concerns regarding your medical care.

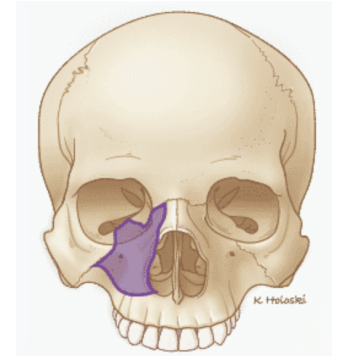
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<https://thancguide.org/cancer-basics/treatments/surgery/ablative/maxillectomy/>

swallow. Alternatively, in some cases your surgeon may be able to use your tissue to reconstruct the area and restore function.

**Suprastructure Maxillectomy:** The bone underneath the eye and upper maxilla are removed without disrupting the roof of the mouth. The eye socket may also need to be removed. To prevent the eye from sinking down into the cheek, reconstruction will be required.

**Subtotal Maxillectomy:** A subtotal, or partial maxillectomy involves some combination of the above procedures without removing the entire maxilla. The combination of procedures and subsequent reconstruction depends on the size and location of the tumor.



**Total Maxillectomy:** This procedure requires the removal of the hard palate, the bone under the eye, and the entire maxillary bone. Again, the eye socket may not need to be removed. This type of surgery demands major reconstruction, including a free flap or prosthetic obturator.

**Reconstruction:** Reconstruction is intended to restore the appearance and function of the area. The level of reconstruction required after a maxillectomy depends on the extent to which the maxilla or surrounding parts were removed. Common methods include skin grafts, local or free flaps from tissue elsewhere in the body, or prosthetics.

### Specific Risks Associated with the Maxillectomy Procedure

- Bleeding, including hematoma (mild bleeding under the skin).
- Infection.
- Deformity of the eye sinking back and down into the cheek (hypoglobus). *Proper reconstruction prevents this.*
- Cheek numbness.
- Chronic tearing.
- Blood clots.

## After Surgery

When you wake up, you may have a drain in your neck to remove excess fluid and secondarily prevent infection. You will be given pain medications to alleviate any pain. You may return home after a few days, or you may stay at the hospital for a week or more, depending on the extent of the surgery. A dedicated discharge planning team will work with your family to ensure you are properly cared for once you leave the hospital.



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