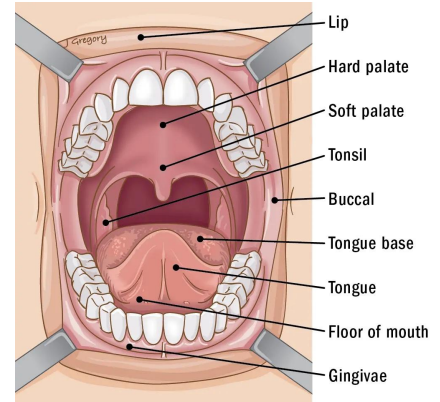




# Palate Resection

A palate resection is the removal of all or part of the palate (the roof of the mouth). This type of surgery is generally required when cancer approaches or invades the hard palate (the bony portion of the palate) or soft palate (the area located behind the hard palate). It may also be performed for palate issues other than cancer.



## 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. 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.

Depending on the reconstructive plan, you may need to see a prosthodontist (a dental specialist who treats complex facial and dental problems) prior to surgery. The prosthodontist can make a mold of your palate, also known as a palatal impression. This may be used to create a palatal obturator (a prosthetic device used to seal off an opening in the palate).

## The Surgery

General anesthesia will be used to put you to sleep during the surgery. A tracheostomy may be performed to help you breathe after surgery. This is usually temporary and will be removed before you are discharged from the hospital.

## Hard Palate Resection

This procedure involves the removal of part or all of the bony portion of the palate which consists of the maxilla (upper jaw) and palatal bone. The surgical wound can be closed using



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/palate-resection/>

nearby tissue if the tumor is small. However, in some cases, a free flap (tissue taken from another part of your body) or a prosthetic obturator may be necessary to close the wound.

## Soft Palate Resection

This procedure involves the removal of part or all of the soft palate, the non-bony portion of the palate. Depending on the size and location of the tumor, this surgery can be performed through a transoral or open approach, or via transoral robotic-assisted surgery (TORS). Additionally, a neck dissection may be performed simultaneously to remove cervical lymph nodes.

### Risks Associated with Palate Resection

- Bleeding.
- Infection.
- Oronasal fistula (a connection between the nasal cavity and the mouth).
- Blood clots.
- Velopharyngeal insufficiency (VPI) (the inability of the soft palate to adequately close and separate the nasopharynx from the oropharynx).

### Risks When Having a Neck Dissection

- Seroma (collection of normal body fluid upon removal of the surgical drain).
- Nerve damage.
- Lymphatic fluid leakage.
- Facial swelling.

## After Surgery

The recovery course will depend on the extent of the surgery and reconstruction. Some patients may be able to return home the day of the surgery (if the resection is less extensive), while others may need to remain in the hospital for up to a week. 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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