Parotidectomy

Parotid gland tumors may be treated with a parotidectomy, which is the removal of part or all of the parotid gland, the largest of many salivary glands. The procedure is performed via an incision that starts in front of the ear and extends down to a natural skin crease in the neck. During the surgery, your surgeon will take great care to identify and preserve the facial nerve, which is very close to the parotid gland, and controls the movement of half of your face.

Types of Surgery
- **Superficial Parotidectomy**: removal of the parotid gland between the facial nerve and the skin.
- **Total Parotidectomy**: removal of the entire parotid gland, including the portions on top of and beneath the facial nerve.
- **Radical Parotidectomy**: a total parotidectomy that also cuts the facial nerve.

Pre-Surgery
You will receive specific instructions from your physician regarding how to prepare for surgery. In general, after midnight the night before surgery, you should not eat or drink anything, except essential medications. On the day of surgery, you will arrive at the hospital several hours before the operation and check in with nurses and anesthesiologists. If you have any last minute questions, this is a good time to ask them.

The Surgery
You will be put to sleep under general anesthesia. Your surgeon may use a special set of electrodes to monitor your facial nerve during the procedure. The electrodes are inserted in key locations to record the electrical activity. At the end of the surgery, the surgeon may place a temporary drain underneath the skin. The drain exits the body behind your ear. This helps to

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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remove any fluid in the space where surgery occurred. The drain is very small and can normally be painlessly removed within 1-2 days.

**Post-Surgery**
Depending on the extent of the surgery and the doctor’s determination, you may be able to leave the hospital several hours after surgery or up to a week after surgery. You should be able to drink and eat soon after surgery. Pain associated with this surgery is usually very mild.

**Risks**

**Bleeding, including hematoma:** If significant bleeding occurs after the operation, you may be taken back to the operating room to stop the bleeding. Mild bleeding or blood collections under the skin (hematomas) can occur.

**Seroma:** Normal body fluid that has collected in the neck can either be resorbed by the body or drained using a needle.

**Infection:** Antibiotics and/or drainage of infection may be required.

**Sialocele:** Collection of saliva under the skin near the surgical site may either slowly resolve without treatment or require additional drainage.

**Ear numbness:** Decreased sensation of the ear and skin of the neck/face may occur. This area of numbness will shrink over time, but the ear lobe may remain numb.

**Frey’s syndrome (“gustatory sweating”):** Sweating on the side of the face during eating may occur because upon removal of the parotid gland, the nerves that normally stimulate saliva secretion can innervate sweat glands instead. Treatment involves applying antiperspirant, injecting Botox, placing a barrier under the skin, or middle ear surgery to cut the nerve that causes gustatory sweating. It is typically rare to develop Frey's syndrome after a parotidectomy.

**Facial nerve injury:** While usually temporary, permanent damage to the facial nerve may occur if one of the facial nerve branches are unintentionally cut or intentionally sacrificed during surgery. For superficial and total parotidectomies, the likelihood of this occurring is rare, especially with facial nerve monitoring. Be sure to ask your care team if they take these protective measures and are experienced with this procedure.

**First Bite Syndrome:** First Bite Syndrome is characteristic of cramping sensation or sharp pain that occurs in the parotid region while chewing. The pain improves with subsequent bites.

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