Functional outcomes of superficial and conservative total parotidectomy; Four years’ experience from Benha-Egypt

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**Background:** Functional outcomes especially facial nerve injury and Frey’s syndrome during the parotid surgery represent annoying problem; as it is associated with cosmetic problems and multiple physician visits; “to minimize these outcomes” remains in question.

**Purposes:** The aim of this study was to find out the frequency of the functional outcomes related to the superficial and conservative total parotidectomy.

**Patients & Methods:** The study included 52 patients; 6 (11.5%) <35 years old, 28 (53.8%) between 35-50 years old and 18 (34.7%) above 50 years old. All patients underwent clinical evaluation, laboratory assessment, U/S, CT scan & MRI examination. All patients were undergoing either superficial or conservative total parotidectomy.

**Results:** In this study, immediately postoperative, facial nerve injury was observed in 20 patients; in this series, 14 (70%) developed temporary facial palsy, whereas 6 (30%) developed permanent facial paralysis. Cervical branch was the most commonly injured nerve 8 (40%). Symptomatic Frey’s syndrome was observed in 5 (9.6%) and parotid leak was observed in 11 (27.5%); all were observed in superficial parotidectomy; as sialocele in 5 (12.5%) or fistula; glandular 4 (10%) or ductal 2 (5%).

**Conclusions:** Facial nerve injury is more common in total conservative parotidectomy than in superficial parotidectomy. Early detection of nerve injury is quite helpful to reduce the facial deformity by early reconstruction and other procedures. But parotid leak only is observed in superficial parotidectomy; most of this leak can be managed conservatively except ductal fistula. Symptomatic Frey’s syndrome is more common in superficial parotidectomy.

Cystic nephroma- A diagnostic dilemma

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Multicystic nephroma is a relatively rare, nongenetic and benign lesion of the kidney which has a bimodal distribution. The non-specific clinical findings and the poor contribution of imaging examinations make the preoperative diagnosis a diagnostic dilemma and difficult to differentiate from other cystic renal neoplasia. We report a case of cystic nephroma in a 40 year old female who presented with right sided abdominal lump and pain in abdomen since 6 months. After a series of examinations including abdominal ultrasound and computed tomography, she underwent right partial nephrectomy and diagnosis was confirmed on histopathology.

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