

# Scapula Free Flap Surgery

Information for patients



This leaflet has been written to help your understanding of Scapula free flap surgery. If you have any other questions please talk to your Surgeon or Clinical Nurse Specialist (CNS).

### **What is a Scapula free flap?**

A scapula free flap is one way of filling a bony 'hole' in either the upper or lower jaw. It is one of the common ways of replacing bone that has been removed or damaged.

### **What does the surgery involve?**

- Your surgeon will take a piece of bone from your shoulder blade (the scapula bone).
- Part of the scapula bone and overlying skin is removed along with two blood vessels, one of which supplies blood to the flap (the artery) and one of which drains blood from it (the vein).
- Once the necessary piece of bone from the shoulder blade is removed, it is transferred to the bony 'hole' and secured in position with small plates and screws.
- The blood vessels supplying and draining the flap are then joined to blood vessels in your neck. These blood vessels help maintain a good blood supply to the flap to help encourage healing.

### **What happens to the 'hole' in the shoulder blade?**

The 'hole' in the scapula bone is left to heal on its own. It takes several months for the shoulder blade to heal completely but at the end of this time it will be as strong as it was before the surgery.

## What can I expect after the operation?

The area of your shoulder where the bone has been removed is likely to be sore but you will be given regular painkillers to help with this discomfort. At the time of the operation, a small tube called a drain is placed through the skin into the underlying wound to drain any blood that may collect. This can usually be removed a few days after surgery.

## Will I have a scar?

All cuts made through the skin leave a scar but the majority of these fade with time. The scar on the back of your shoulder blade is usually several inches long.

## What are the possible complications of this type of surgery?

*There are potential complications with any operation. Fortunately with this type of surgery complications are rare but can include:*

- **Bleeding** – the drain inserted at the time of surgery helps to reduce the chances of this.
- **Wound Infection** – infection can occur in approximately 20% of patients having this surgery. You will be given antibiotics through a vein whilst you are asleep during surgery and in the early period after surgery to help reduce the chances of this.
- **Numbness** – occasionally a patch of skin over the back of your shoulder will feel numb and tingly after the operation. This numbness may take several months to disappear and in a minority of patients may be permanent.

- **Shoulder movement** - you may find that your shoulder movements are restricted after surgery but this is often due to swelling, the position of any drains and the stitches/clips (used to close the wound) in your skin. This should improve over time. Gentle exercise will help to reduce any swelling in the area, and help prevent shoulder and neck pain/stiffness.
- **Flap failure** – in 2-5% of patients, a blood clot can develop in one of the blood vessels attached to the flap. This can mean that the flap doesn't get any fresh blood or, if it is the drainage vein that has a clot, then the flap becomes very congested with old blood. If this does occur, it will usually happen within the first two days following surgery and means that you will have to return to the operating theatre to have the clot removed. Removing the clot is not always successful and on these occasions the flap 'fails' and an alternative method of reconstruction is sought (more information would be given to you about this at the time).

## What exercises should I be doing?

Most patients benefit from simple exercises and it is important to maintain movement in your neck and shoulder. The Physiotherapists and nursing/ medical team will encourage you to start exercises following surgery and can provide more information on this.

*This leaflet has been adapted from Aintree Hospitals Patient Advice Sheets with the authors' permission*



Leaflet printing funded by the **Leeds Cancer Centre Charity**, part of the **Leeds Cares** charity family, in partnership with Leeds Teaching Hospitals  
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© The Leeds Teaching Hospitals NHS Trust • 1st edition (Ver 1)  
 Developed by: Mary Fitzgerald Clinical Nurse Specialist  
 Produced by: Medical Illustration Services • MID code: 20180104\_009/JG

LN004276  
 Publication date  
 02/2019  
 Review date  
 02/2021