

Radial Forearm Free Flap

Information for patients



This leaflet is intended to help you and your family understand more about radial forearm free flap surgery. If you have any other questions please do not hesitate to speak with your Surgeon or clinical nurse specialist (CNS).

What is a radial forearm free flap?

A radial forearm free flap is one way of filling a defect in the mouth which is left when a cancer has been removed.

What does the surgery involve?

- Your surgeon will take a piece of tissue including skin, fascia (fatty tissue) and blood vessels from the inside surface of your forearm near the wrist.
- The skin and fascia in this region is removed (the flap) along with two blood vessels. One vessel supplies the blood to the flap (the artery), the other drains blood from the flap (the vein).
- Once the flap of skin is raised it is transferred and sewn into the defect created by the removal of your cancer.
- The blood vessels supplying and draining the flap are then joined to blood vessels in your neck under a microscope. These blood vessels then keep the flap alive while it heals into its new place.
- Once the flap is removed from your forearm the defect created is covered with a skin graft. This graft can be taken from one of several places; such as the arm, abdomen or thigh.

What will my arm be like afterwards?

- Your forearm will be dressed, bandaged, supported in a sling and elevated for 48 hours after surgery.
- For the first 10 days you will need to limit your wrist movements to protect the graft. A special splint bandaged to your arm will help with this.
- The dressing, splint and stitches are removed after 10 days and a lighter dressing is applied.
- The nerve which supplies feeling to the skin over the base and side of the thumb is sometimes bruised when the flap is raised. This can mean that the area ends up tingly or numb for several months or permanently following surgery. Very rarely a bruised nerve can also give rise to feelings of pain in this area.
- After surgery you may notice numbness at the root of your thumb and sometimes it may feel colder in the winter months. This will not affect the movement or function of your hand however.
- On average, your hospital stay will be about 10-14 days.

What are the possible complications with this type of surgery?

There are potential complications with any operation. Fortunately, with this type of surgery, problems are rare. However, it is important that you are aware of them and have the opportunity to discuss them with your surgeon.

- **Flap failure** - In 2-5% of patients the blood vessels supplying or draining the flap can develop a blood clot. This means that the flap does not get any fresh blood or, if the drainage vein clots, the flap becomes very congested with old blood.

If this occurs, it usually happens in the first two days 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.

- **Infection** - You will be given antibiotics through a vein whilst you are asleep and for the first day after surgery which helps reduce the risk of infection.
- **Scar** - The operation will leave you with a scar on your forearm, which will fade over time, gradually becoming less visible. If scarring is of a concern to you, a camouflage therapist can help once the wounds have fully healed. Please ask your Clinical Nurse Specialist (CNS) for details.

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

The printing of this leaflet has been funded thanks to donations and gifts in Wills to Leeds Hospitals Charity
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© The Leeds Teaching Hospitals NHS Trust • 2nd edition (Ver 1)
Developed by: Mary Fitzgerald Clinical Nurse Specialist
Produced by: Medical Illustration Services • MID code: 20220629_005/EP

LN004360
Publication date
07/2022
Review date
07/2024