



Randall Cohen MD
Catalina Ear Nose and Throat PC

Risks and Complications of Submandibular Gland Excision

Submandibular gland excision is an operation to remove the submandibular gland. It is performed for cases of chronic submandibular gland infection, salivary duct stones, or tumors. As with any surgery, there are not only benefits but also risks. The following information will help you understand the risks of a submandibular gland excision. As with any operation, there may be some unanticipated complications beyond those listed here.

Bleeding: Substantial bleeding requiring transfusion is extremely rare. A hematoma or collection of blood under the skin incision is unusual. Removal of the clot may require additional surgery and prolonged hospitalization.

Infection: Though infection is not common, it is a risk with any surgical procedure. Should infection occur, it may require prolonged treatment in and out of the hospital. Fortunately this is a rare complication. A wound infection occurs in a few cases and is treated with antibiotics and drainage is usually not a serious problem.

Nerve Injury: A nerve that depresses the corner of the mouth (like a frown) travels over the submandibular gland. It is usually easily dissected away from the gland before excision to protect it from injury. However an immediate or delayed weakness of the corner of the mouth may occur as the result of swelling or injury of this nerve branch. Such a weakness or injury is usually not noticeable. There may also be damage to the lingual or hypoglossal nerve. These nerves affect the ability to move your tongue or taste.

Taste Disturbance: Taste disturbance and mouth dryness occasionally occur following surgery. In rare patients, this disturbance is prolonged to several months. Very uncommonly it could be permanent.

Numbness: A lack of sensation around the area of your incision is very common and can last for several months. In rare instances, the numbness can be permanent. Very rarely numbness of part of the tongue can occur.

Scar: You will have a scar underneath the side of your jaw. Initially this will be swollen and red. As it heals, the swelling and redness will lessen. It is a good idea not to expose the scar to direct sunlight for the first six months after surgery to prevent the scar from hyper pigmentation (getting darker).

Recurrence: Although every attempt is made to remove the entire submandibular gland, there is a small possibility of recurrence due to residual or recurrent disease. Those may require additional surgery and is very uncommon.

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CATALINA EAR NOSE & THROAT
5910 N La Cholla Blvd.
Tucson, AZ 85741
(520) 498 - 1800