Success Rate And Outcomes Of Free Flaps Reconstructions In Elderly Patients

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Objectives: Microvascular flaps have become standard in the reconstruction of defects after radical excision of malignancies in the head and neck region. The aim of this study was to determine the correlation between the age of patient and survival and the success of microvascular flaps.

Material and Method: The study involved thirty-one patients, aged 70 years and over who were referred and hospitalized at the Clinic for Maxillofacial and Oral Surgery, University Hospital Dubrava, Zagreb, from 1996 to 2009. Established database of all hospitalized patients contained information on gender, age, date and length of surgery, primary diagnosis, comorbidity, type of surgery and microvascular flap, ASA status (American Society of Anesthesiology), survival rates, and postoperative complications.

Results: The results of this study indicate that the number of treated male patients was significantly higher than females (59.38%: 40.63%). The youngest patient in the study age group was 70 years old and the oldest 87 years. The average age was 75 years. The most commonly used microvascular flap for reconstruction of the defect was radialis forearm flap (12 patients), and then latisimus dorsi flap (8 patients). The average length of surgery was 6 hours (range 4 to 14 hours). Patients with higher ASA status had significantly more postoperative systemic complications, but not surgical.

Summary: This study suggests that patient age should not be a contraindication for radical surgery of carcinoma of the head and neck, and followed by a reconstruction with microvascular flap. ASA and duration of surgery are significant predictors of postoperative medical and surgical morbidity.