

Single Supraclavicular Transverse Incision for Radical Neck Dissections

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Abstract

Background & Aims: To describe unilateral and bilateral modified radical neck dissections with access to the thyroid gland and all neck lymph node levels through a single supraclavicular transverse incision.

Methods: Ten patients with thyroid or lip carcinomas were submitted to unilateral or bilateral neck dissection through a transverse supraclavicular neck incision. All anterior and lateral neck lymph nodes associated with surrounding fibrofatty tissue were dissected and removed, preserving both sternocleidomastoid muscles and internal jugular veins. Patients with thyroid carcinoma were also submitted to a total thyroidectomy during the same procedure.

Results: This surgery was feasible in all patients, preserving oncological principles with no adverse event.

Conclusions: A single supraclavicular transverse incision allows adequate access to all levels of the neck lymph nodes, minimises the risk of tissue breakdown and scar disorder, with good cosmetic results. This incision is indicated for radical lymphadenectomy and may be combined with other neck surgeries.

Key words: neck dissection, single transverse incision, modified neck lymphadenectomy, head and neck surgery, cosmetic healing