

What is a neck dissection?

A neck dissection is an operation to remove lymph nodes from the neck on one or both sides.

What are lymph nodes?

Lymph nodes are glands that are present throughout your body. You may have felt swollen lymph nodes in your neck when you have had an infection such as a simple cold. Their job is to filter the liquid that naturally leaks out of blood vessels. This liquid (the lymph) travels to the nodes which contain lots of white blood cells designed to trap and fight germs which can cause infection. As well as trapping germs, the lymph nodes can also trap cancer cells.

Have I got cancer in my lymph nodes?

It is often not possible to tell this until after your operation when the glands removed from the neck are carefully looked at under a microscope. Your doctor will have already felt your neck to see if there are any lumps and you will have had a special scan (CT or MRI) to look more closely at the glands.

Glands can feel big if there is infection in the area, so if you can feel a lump in your neck it does not necessarily mean that the cancer has spread. If there are only small amounts of cancer cells present in the glands then the neck can feel normal and look normal on the scan. This is often why we do not know if the cancer has spread to the neck until the glands have been looked at under a microscope.

Will I be able to fight infections once my lymph nodes have been removed?

Yes. There are thousands of lymph nodes throughout your body which will still be there to fight infection.

What does the surgery involve?

An incision is made to gain access to the lymph nodes in the neck. The cut usually starts just underneath the chin and extends downwards towards the collarbone before arcing upwards to behind the ear. This flap of skin is lifted off the tissues of the neck to expose the lymph nodes. Once the lymph nodes have been removed the flap of skin is replaced and held with stitches or clips.

What can I expect after the operation?

At the end of the operation a number of tubes are placed through the skin into the wound to drain any blood which may collect.

These usually stay in place for a couple of days before being removed. Some discomfort is to be expected and is usually worse in the first few days although it may take a couple of weeks to disappear completely.

It is important to make sure that the wounds heal without any infection, so you may be given antibiotics through a vein in your arm whilst you are in hospital.

You will also be given regular painkillers.

The skin stitches or clips will be removed around a week following surgery. The skin of your neck will feel numb for several months after surgery as a result of bruising to the nerves.

What are the possible problems?

There are risks with any operation. Fortunately, with this type of surgery complications are rare and may not be experienced by you. However, it is important that you are aware of them and have the opportunity to discuss them with your surgeon.

Most of the problems associated with neck dissection are the result of damage to one or two nerves:

- Accessory nerve – this is the nerve which runs from the top to the bottom of the neck and helps you to move your shoulder. It has lots of lymph glands lying very close to it and so it is often bruised during a neck dissection. If the nerve is bruised, it can stop working for several months. If this happens you may experience pain and some difficulty in moving your shoulders which makes getting dressed less easy. Rarely, the lymph nodes cannot be completely removed without cutting this nerve. In this case these shoulder problems will be permanent.
- Facial nerve – the branch of the facial nerve which makes your lower lip move can be bruised when the lymph nodes close to it

are removed. If this happens the lower lip does not move properly and you may end up with a weakness resulting in a crooked smile. This usually gets better by itself but can take several months.

Will I need to have further treatment after my neck dissection?

This depends on what is found when the lymph nodes are looked at under a microscope. It takes several weeks to look at the lymph nodes properly, so your doctors will not know until then whether additional treatment is necessary, if cancer cells are present. Any additional treatment usually involves specialised x-ray treatment in the form of radiotherapy.

Further questions

If you have any further questions or concerns, please do not hesitate to contact us:

Maxillofacial Unit - Tel: 01342 414000 ext. 4708
Monday - Friday 8.30am - 5.00pm

In an emergency, out of hours, please telephone the hospital switchboard on **01342 414000** and ask for the maxillofacial doctor on duty.

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Please ask if you would like this leaflet in larger print or a different format.

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