



Removal Of Sublingual Salivary Gland Patient Information

Aintree University Hospitals **NHS**

NHS Foundation Trust

Where quality matters

Regional Maxillofacial Unit
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Liverpool L9 7AL
Tel:0151-525-5980

What is the Sublingual Gland

- The sublingual gland is a salivary gland about the size of an almond that lies underneath the tongue in the floor of your mouth.
- Saliva drains from it through a number of small tubes that open on the inside of the mouth underneath the tongue.
- The most common reason for removing a sublingual gland is as a result of a blockage to these drainage tubes. This can lead to a swelling (ranula).

What are the benefits of surgery?

Surgery is usually performed to remove the damaged gland for patients who have problems from a gland blockage or persistent swelling.

What does the operation involve?

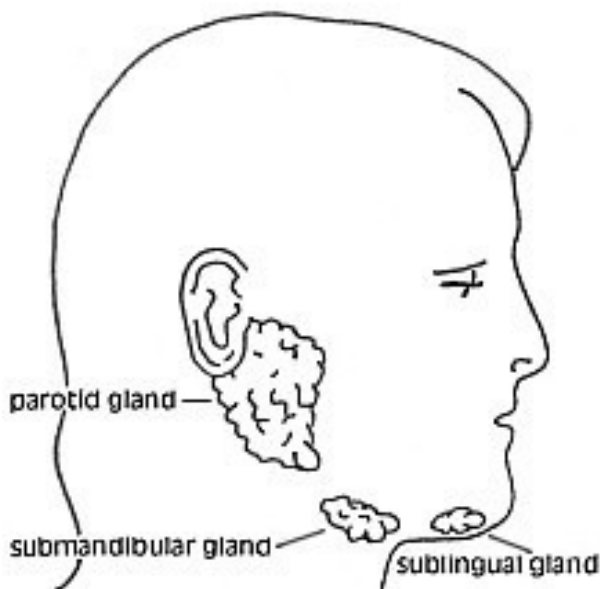
- The sublingual gland is removed under general anaesthesia, i.e. you are put to sleep completely.
- The operation involves making a cut around 2cm long underneath the tongue on the inside of the lower teeth.
- Once the gland has been removed the incision is held together again with stitches.
- These are usually dissolvable but may take several weeks to disappear

How long will the operation take?

The length of time partly depends upon the degree of difficulty. In an uncomplicated procedure it will take approximately 30 minutes to remove the sublingual gland.

What can I expect after the operation?

You usually need a night in hospital following the surgery. It is unlikely to be very sore but regular painkillers will be arranged for you. There is relatively little swelling following sublingual gland removal.



What can I do to the make the operation a success?

• Lifestyle changes

If you smoke, try to stop now. There is strong evidence that stopping smoking reduces the chances of getting post-operative complications and infection.

What are the risks and complications?

The surgical team will try and make your operation as safe as possible. However, complications can happen every operation carries a risk.

The complications fall into three categories:

- Complications of anaesthesia
- General complications of any operation
- Specific complications of this operation

Complications of anaesthesia

Your anaesthetist will be able to discuss with you the risks of having an anaesthetic.

General Complications

Pain

- Pain happens with every operation. The surgical team will try to reduce your pain.
- You will be prescribed painkillers and it is important you take as instructed by your surgical team.
- The discomfort is usually worse for the few days although it may take a couple of weeks to completely disappear.

Blood clots

- Blood clots in the legs (deep-vein thrombosis) can start with pain, redness and swelling in your calf.
- If you get these symptoms please inform a member of the health care team

Specific complications

Bleeding

- Bleeding from the wound is unlikely to be a problem. If it occurs it usually does so within the first 12 hours after surgery which is why you need to stay in hospital overnight.

Infection

- Infection is uncommon but if your surgeon thinks it may happen to you a short course of antibiotics will be prescribed,

Numbness of the tongue

- The lingual nerve which supplies feeling to the side of the tongue can become bruised as a result of surgery.
- If this occurs you will experience a tingly or numb feeling in the tongue, similar to the sensation after having an injection at the dentist.

This numbness may take several months to disappear and in a minority of patients may last forever.

Damage to the submandibular duct

- The submandibular duct is the name of the tube which carries saliva from the submandibular gland into the mouth.
- The submandibular gland is a salivary gland about the size of a plum that lies immediately below the lower jaw at the top of the neck.
- The duct runs close to the sublingual gland before opening on the inside of the mouth under the tongue immediately behind the lower front teeth.
- If this duct is damaged saliva may not drain properly from the submandibular gland and the gland may therefore swell in the upper part of the neck.
- The majority of these swellings settle down on their own.

Do I need to take time off work?

- It is usually advisable to take a week off from work to recover from the surgery.

During this time you should avoid strenuous activity.

- It is important to remember that you will not be able to drive or operate machinery for 48 hours after your general anaesthetic.

Will I have a scar?

- At the time of surgery the wound is only gently held together with a few stitches so initially you will see some gaps. Please do not be concerned by this.
- All cuts leave a scar but inside the mouth the majority of these fade with time and are difficult to see when they are fully healed.
- It will take a couple of months for your scar to fade completely.

Are there any long-term effects if I have my sublingual gland removed?

- The removal of one sublingual gland will not have an impact on the amount of saliva that you produce.
- There are many other salivary glands left in and around the mouth that will still keep it moist.

What can I do to make my recovery a success?

- Take your painkillers as prescribed regularly for at least 2-3 days, then according to the discomfort. (But do not exceed the prescribed daily dose)
- Keep stitches and dressings dry until they are removed. (Stitches usually removed 7 days post surgery)
- Contact the hospital immediately on 0151 529 5195/5196 if you have any problems.
- Attend your appointments; however, if for any reason you are unable to attend

an appointment please let the hospital know as soon as possible.

- Before you leave hospital an appointment will be arranged to take out any stitches and review you in the outpatient department.
- We hope you have found this information leaflet useful, its intention is for information purposes only and you should read it either together with or depending on any advice given by your relevant health professional.
- If you have any problems or need further advice please contact the Maxillofacial Department at University Hospital Aintree (Ward 29) on:
0151 529 5195/6 Fax 0151 529 5194.

Further information.

You can get further information locally from the Patient Advice and Liaison Service (PALS) on 0151 529 3287 (answerphone 0151 529 2400, fax 0151 529 2019, textphone 0151 529 2523)

You can also get further information from.
www.aboutmyhealth.org for support and information you can trust.
www.baoms.org.uk British Association of Oral & Maxillofacial Surgeons.
www.bda-dentistry.org.uk British Dental Association (tel 0207 935 0875)
www.nhsdirect.nhs.uk NHS direct 0845 46 47 (textphone 0845 606 46 47)

Counselling in the community 0151
922 3760

Samaritans 0151
708 8888

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If you require a special edition of this leaflet

This leaflet is available in large print, Braille, on audio tape or disk and in other languages on request. Please contact the Patient Advice and Liaison Service [PALS] on:



Telephone

0151

529 3287

Textphone

0151

529 2523

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0151

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[for the hearing impaired]

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若是你想索取這份傳單的中文譯本，請聯絡「病人預約中心」或向其中一名職員查詢。

Si vous voulez cette brochure en français, contactez le bureau des rendez-vous ou demandez à un membre du personnel.

यदि आप यह परचा हिन्दी में लेना चाहते हैं तो कृपया पेशेन्ट अँपाइन्टमेन्ट सेन्टर से संपर्क करें या किसी स्टाफ से पूछें।

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Mae'r daflen hon ar gael (ar gais), mewn print bras, ar dâp sain neu ar ddisg, ac efallai mewn ieithoedd eraill ar gais. Cysylltwch â chanolfan apwyntiadau cleifion i ofyn am gopi.

