

Guzy płata głębokiego ślinianki przyusznej

Deep lobe of parotid gland tumors

Summary

Introduction: Surgery of the parotid gland tumors can be difficult because of the presence of the facial nerve branches in the parotid tissue. The aim of the surgical treatment is complete removal of the tumor without damaging the facial nerve. There are several surgical techniques to expose the main trunk and the branches of the facial nerve. On the other hand during the surgery the nerve function is continuously observed by using facial nerve monitor. **Material and meth-ods:** In the years of 2002-2004 208 patients with the parotid gland tumors were treated. There were 177 benign and 31 malignant tumors. 159 tumors were located in the superficial lobe of the parotid gland, 35 in the superficial and the deep lobe, and 14 only in the deep lobe. All patients were treated surgically. **Results:** In cases concerning the operations of the tumors located in the deep lobe, the facial nerve branches had to be exposed with help of the microscopic operating techniques. All tumors were removed totally. A paralysis of the facial nerve was observed in two cases of the pleomorphic adenoma with a diameter over 6 cm, and in 9 cases of malignant tumors of the superficial and the deep lobe, where the main trunk or the branches of the facial nerve were integrated with the tumor mass. **Conclusion:** Surgical treatment of the parotid gland tumors presented in our study demonstrates good results. The risk of facial nerve paresis is higher in malignant tumors and big pleomorphic adenomas.