

PATIENT INFORMATION

Salivary Gland Cancer

Your salivary glands are found below your tongue, in front of your ears and under your jaw-bone. Salivary glands make saliva, the fluid that is released into your mouth to keep it moist and help dissolve your food.

How is salivary gland cancer diagnosed?

Your doctor will carefully examine your throat and neck, and take a general history of your signs and symptoms. Your doctor may then order a special x-ray called a CT scan using a computer to make a picture of the inside of your head and neck or another special scan called an MRI scan may also be done. The doctor may use a fine needle and syringe to take a sample of cells from the affected area to examine under a microscope.

What types of treatment are available?

There are three different forms of treatment as follows:-

1. **Surgery** is often used to remove cancers of the salivary gland. If cancer has spread into the lymph nodes in the neck, the lymph nodes may also be removed; this is called a neck dissection. This operation may be performed at the Royal Devon and Exeter Hospital.
2. **Radiotherapy** can also be used to destroy cancerous cells, sometimes instead of surgery sometimes after surgery. This decision will be made by the team looking after you and is based on the results of the scans and biopsies.
3. **Chemotherapy** means treatment with anti-cancer drugs. This is rarely used to treat salivary gland cancer. It may be used if the cancer has spread more widely.

Care is provided throughout by a large team of doctors, nurses, dietitians, physiotherapists and speech and swallowing therapists all offering support and information for you and your family.

What can I expect from the operation?

You may be admitted to hospital the day before your operation.

The operation is performed under a general anaesthetic, which means that you will be asleep throughout. A cut will be made either under your jaw or in front of your ear depending on which gland is affected. This is often in a natural crease in the skin, to allow the surgeon to see the tissues and structures underneath.

At the end of the operation you may have a small drain coming out through the skin and stitches or clips to the skin. Often during the operation small nerves may be cut which can make the skin numb, this numbness will usually wear off. If you do suffer any pain or discomfort please tell the ward nurses. The average stay in hospital is 2-5 days

What problems can occur?

Bleeding: Sometimes the drain tube can block or fail to work and any bleeding can collect under the skin to form a clot. If this occurs a return trip to the operating room may be required to remove the clot and replace the drains.

Infection: Your wounds will be cleaned and dressed as necessary. Any infection can usually be easily treated with antibiotics.

Nerve damage: Although we make every effort to avoid damage, the nerve controlling the movement and feeling of your face can be affected by tumour and may need to be removed. It is likely that the area around the scar and ear lobe will feel numb.

Dry mouth: Radiotherapy will cause your salivary glands to produce less saliva. Your oncologist and specialist nurse can discuss ways to help with dry mouth problems.

How quickly will I recover?

Recovery depends on the type of treatment you have undergone as well as your own individual healing. Resuming daily activities, including work, as soon as you are able can help the healing process.

You will be seen by the dietitian and she will advise you on the best diet to promote healing and recovery.

You may need further treatment. Sometimes we add radiotherapy to surgery to make sure we get the best chance of a cure.

Your feelings

You are likely to experience a number of different emotions; from shock and disbelief to fear and anger. These feelings are quite natural and it is important for you to be able to express these feelings if you wish.

Everyone has their own ways of coping with difficult situations; some people find it helpful to talk to family and friends, while others prefer to seek help from professionals, and some will prefer to keep their feelings to themselves. There is no right or wrong way to cope, but help is there if you need it.

Talk to your specialist nurse for further information about the help available. Remember, there are other patients who have gone through the same situation. Your specialist nurse can put you in touch with someone who knows what it is like.

Contact:

Head and Neck Specialist Nurses ☎ (01803) 655044

Macmillan Support Line ☎ 0808 808 00 00

Website <http://www.macmillan.org.uk/Aboutus/ContactUs/ContactUs.aspx>

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.