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Supracricoid laryngectomy with cricohyoidoepiglotopexy – 12 years' experience

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Introduction: Supracricoid laryngectomy with cricohyoidepiglotopexy (CHEP) appears as an alternative to total laryngectomy for selected glottic and transglottic carcinomas, allowing preservation of laryngeal functions, without compromising oncological results. Furthermore, given the current organ preservation protocols with chemo/radiotherapy it has the advantage of avoiding salvage surgeries in irradiated tissues. The aim of this study was to analyze the oncological and functional results of this surgical technique over 12 years in an institution dedicated to oncological pathology.

Material and Methods: A retrospective study was carried out on patients submitted to supracricoid laryngectomy with CHEP at the Portuguese Institute of Oncology, between 2009 and 2021.

Results: In the study period 14 supracricoid laryngectomies were performed. Most cases corresponded to cT2 an cT3. Most patients were cN0 and none had distant metastasis. Neck dissection was performed 85.7% of cases. On average decannulation occurred 35 days after surgery. The mean time for nasogastric tube removal was 135 days pos operatively. The mean follow up time was 71 months. One patient had local recurrence of disease 11 months after surgery, requiring total laryngectomy. Disease-free survival was 100%.

Conclusion: Supracricoid laryngectomy with CHEP is a valid surgical option as an organ preservation strategy with safe oncological results.

Biography

Joana Gonçalves is an ENT resident at Coimbra Hospital Centre. She recently did an internship in the Portuguese Institute of Oncology in Coimbra where she acquired interest in the Head and Neck Oncology.

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