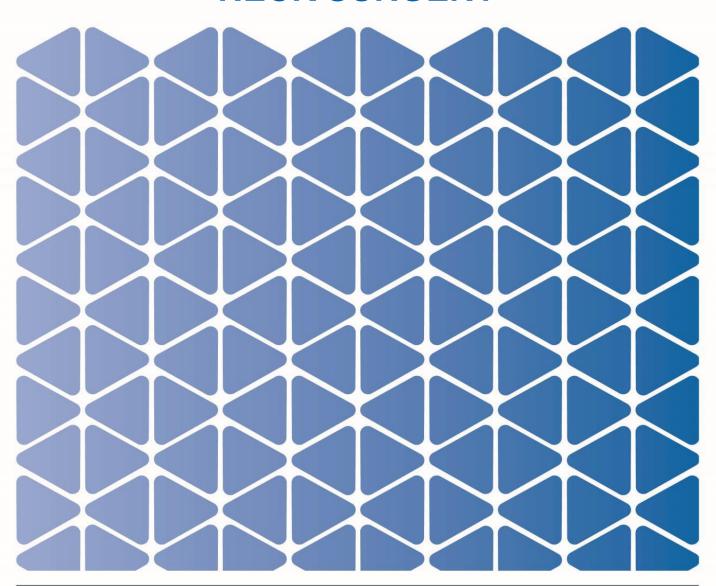




PATIENT INFORMATION

ADVICE & EXERCISES FOLLOWING NECK DISSECTION/ MAJOR HEAD & NECK SURGERY







This leaflet should be used as a guide to patients who have already been instructed by a physiotherapist

What is a neck dissection?

A neck dissection is an incision made on your neck which extends from your ear down to your lower lip or chin and allows your surgeon access into your neck and mouth. This is a common procedure performed for patients having treatment for head and neck cancer. It can be one side of your neck or both.

What are the risks of a neck dissection?

The main risk of a neck dissection is loss of movement of your shoulder and neck because of damage or removal of structures in the neck. The important structures affecting neck movement are the large muscle running down the side of your neck (the sternocleidomastoid) and more importantly the spinal accessory nerve; which powers some of the shoulder muscles. You may also experience altered sensation across the top of your shoulder, neck and face. The type of neck dissection you will require and the likelihood of damage or removal of these structures will have been discussed with you as part of your pre- operative assessment by the surgical team.

Why should I exercise?

Following your neck dissection surgery it is important that you start to exercise your neck and shoulders in order for you to regain as much movement as possible. Gentle exercises will also help to reduce any swelling in the neck and help prevent shoulder and neck pain and stiffness.

When can I start my exercises?

Most patients following a neck dissection will have up to 2 drains in place for 1-3 days to help drain off any excess fluid following surgery. These drains may limit your movement slightly, but it is still important to start gently exercising from the first day after your operation, to prevent early neck and shoulder stiffness.

What exercises should I be doing?

Most patients benefit from simple exercises. Following a neck dissection it is important to keep your neck, shoulder and shoulder girdle moving. As physiotherapists, we encourage you to start with four simple exercises in sitting or standing:

 Shoulder Shrugging: shrug your shoulders together or roll your shoulders in both directions. Drawing your shoulder blades together and down towards your lower back.



2. Forward arm lifts:

Lift your arm up one at a time as far as you can, letting the thumb lead the way.



3. **Sideways arm lifts:** lift your arm up sideways as far as you can with the thumb leading the way.



- 4. Neck movements: while sitting,
 - i) turn your head to one side until you feel a stretch. Hold for approximately 2 seconds and then repeat to the other side. Ensure your shoulders are not moving with you as you do the movement.



ii) Moving your head, look up as far as you are able until you feel a stretch, hold for 2 seconds then look down as far as you are able until you feel a stretch and hold for a further 2 seconds.

Posture

Good posture is essential following your surgery to promote normal movement as much as possible. Try to ensure that you are not holding yourself stiffly.

In sitting: ensure that you are not slumped, make sure that the small of your back is well supported and you are sat up straight.

In lying: make sure that you do not have too many pillows pushing your head forward. Pull a soft pillow around your neck to support the small of your neck.

How often should I do these exercises?

It is always best to do 'little and often' rather than lots of exercises at one time. Exercising twice a day for between five and ten minutes is recommended. Your physiotherapist will be able to advise you on exactly what you should be doing. However, as a general rule repeat each exercise 5 times in each direction.

How will I know if I have done too much?

None of these exercises should produce pain, however you may feel a little discomfort. If you over exercise you may feel sore and stiff straight after or the following day. It is best to avoid this if possible make sure you exercise **gently** and **slowly**.

What can I not do?

Following a neck dissection we ask you to avoid lifting heavy objects for a few weeks after your operation. You should also take care if you are to return to driving as you will be expected to have good movement of your neck and shoulder to keep your car insurance valid. The physiotherapist will give you advice post- operatively, based on the extent of the neck operation you have had, as to the likelihood of residual mobility problems affecting your ability to lift objects and driving.

Contact details

If you have any specific concerns that you feel have not been answered and need explaining, please contact the following.

- Head and Neck Ward 01905 760545
- Head and Neck Physiotherapist 01905 763333 Ext 39119

•

Other information

The following internet websites contain information that you may find useful.

- <u>www.worcsacute.nhs.uk</u>
 Worcestershire Acute Hospitals NHS Trust
- www.patient.co.uk

Information fact sheets on health and disease

www.rcoa.ac.uk

Information leaflets by the Royal College of Anaesthetists about 'Having an anaesthetic'

www.nhsdirect.nhs.uk

On-line health encyclopaedia

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.