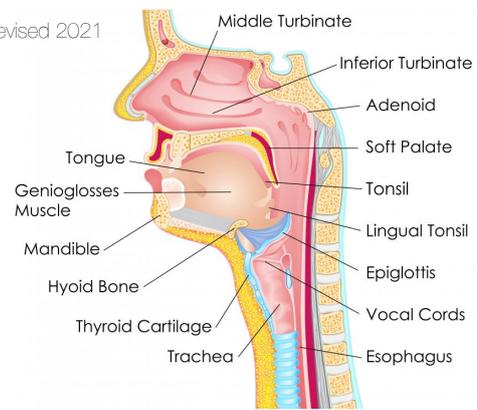




Mr Nicholas Agar

**GEELONG**  
Head and Neck

Revised 2021



# Vallecular/Pharyngeal cyst removal

Vallecular or tongue base cysts occur due to blockage of a small mucous secreting gland on the surface of the lining of your tongue or epiglottis. They are usually benign and commonly found by accident during a scan or when someone examines your throat. Most patients do not have symptoms from them, but they can cause the feeling of a lump in throat, and occasionally the cyst fluid can become infected. They are removed to help any symptoms you may have, but also so we can be certain that it is simply a benign cyst and not a small tumour.

## The Operation

This is a day stay procedure which takes approximately 30 minutes. Both myself and your anaesthetist will see you prior to the operation. Once you're asleep I will place a mouthguard to protect your teeth, then I will examine your tongue base using an "Operative Laryngoscope". The cyst will be removed or de-roofed.

## The Recovery

When you wake up in the recovery room you will have a sore throat and may have some specks of blood in your saliva. Once you're awake enough I will discuss the findings of the procedure with you. When you are comfortable enough to eat and drink you can be discharged home (usually a minimum of 2hrs post op). The sore throat may worsen in the first few days, but will then gradually improve and typically subside by 7 days.

## Diet

It is important to stay well hydrated - I recommend three extra glasses of water per day. A normal diet is safe although softer foods are often easier to tolerate if your throat is sore.

Some useful examples are:

- Dairy foods; yoghurt, milk, smoothies, soft cheeses, ice cream.
- Vegetables; steamed or boiled, mashed potatoes/pumpkin, soups.
- Fruit; pureed or stewed.
- Proteins; Eggs poached or scrambled, fish, baked beans, mince meats.
- Grains; breakfast cereals (softened with milk), porridge.

## Post Op Medications

Paracetamol and an anti-inflammatories such as celebrex or ibuprofen are usually all that are required.

## What can go wrong?

The surgery is usually safe and uncomplicated.

Serious complications or drug reactions related to the anaesthetic are very rare. General symptoms of nausea, vomiting and drowsiness may occur as a side effect of both the anaesthetic and any opiate pain medications you subsequently take.

**Bleeding** – specks or streaks of blood mixed with the saliva is common. However if you have large amounts of blood or any fresh active bleeding that is worrying you then you need to contact me and/or call an ambulance.

•**Dental injury/Jaw joint strain** - the instruments used do apply pressure to the upper teeth (or gums if you have dentures). Teeth can rarely be chipped or damaged. Aching in the jaw joint usually subsides with anti-inflammatories.

•**Airway complications** - When operating in the airway, blood or mucous can occasionally go down into the windpipe causing breathing problems which may necessitate a longer stay in hospital. This is uncommon.

## If you need help....

- 1) **In hours call me via my office 52218490**
- 2) **After hours call me on my mobile 0425746617**
- 3) **If I am unable to respond please -attend the Geelong Hospital Emergency Department and the oncall ENT surgeon will become involved if necessary.**  
**OR**
- 4) **call an ambulance on 000**