Introduction:
Various types of locoregional and distant flaps have been proposed for small to medium size defect in area of oral cavity and mid to lower face area. Pedicle infrahyoid myocutaneous flap (IHMF) is a versatile flap which can be performed concomitantly with head and neck oncologic procedure. In 1991, Supakorn et al. [21] reported successfulness and versatility of this flap and proposed this technique for Thai council of surgery and Siriraj hospital, Bangkok, Thailand.

Material and Methods:
Retrospective crosssectional-study design was conducted in a single tertiary hospital (Siriraj hospital, Bangkok, Thailand). We reported success rate, complications and analysed potential independent factor that had effect on final outcome.

Operative procedure:

Results:
From 1987 to 2009, we performed 55 IHMF flap. The average follow time is 36.2 month (range from 6-108 month).49 (89.1%) flaps successfully survived and 6 (10.9%) patients had flap failure. There were 39 (70.9%) vertical skin paddles and 16 (29.1%). horizontal skin paddles There was no significant difference in sex, age, nutritional status (haemoglobin, albumin level) and underlying disease between success and failure group. Smoking was the only factor that had statistical significant difference. Mean number of total node and positive node, cell type and differentiation and angiolymphatic invasion had no significant statistic effect on flap outcome. None of incision type, cancer operation, neck dissection type, flap size and monobipedicil or bipedicil flap had significant difference.

Table 1 flap outcome

Table 2 Patient Characteristics

Table 3 Data of Operative Treatment and Details of Flap Procedure

Conclusion:
We had 10.9 % total flap failure rate of IHMF in reconstruction for small to medium size defect after oncologic resection of oral cavity cancer and mid to lower face. The potential factor that predominated in failure group was smoking. No significant different in outcomes in horizontal flap design compared to conventional vertical flap design.

Reference