

Maxillo-Facial Department

Removal of the Parotid gland

What is the Parotid Gland?

The parotid gland is a salivary gland that lies immediately in front of the ear. Saliva drains from it through a tube that opens on the side of the cheek, next to the upper back teeth. The parotid gland is most commonly operated on to remove a lump.

What does the operation involve?

The parotid gland is removed under a general anaesthetic, (you are put to sleep completely). The operation involves making a cut immediately in front of the ear. Once the gland has been removed, this incision is closed using stitches which usually need to be removed about a week after surgery. At the end of the operation a small tube is also placed through the skin into the underlying wound to drain any blood, which may have collected. This is usually removed the morning following surgery.

Will anything else be done while I am asleep?

If your gland is being removed because of infection that is caused by a stone, it may also be necessary to make a cut inside the mouth to remove that stone.

How long will the operation take?

Removal of all or part of the parotid gland is a complicated operation, which takes approximately 2 hours.



What can I expect after the operation?

You usually need to spend a night in hospital following the surgery. It is unlikely to be very sore but regular painkillers will be prescribed for you.

Do I need to take time off work?

It is usually advisable to take a week off work to recover from the surgery. During this time you should avoid any strenuous activity.

Will I have a scar?

All cuts made through the skin leave a scar but the majority of these fade with time and are difficult to see when they are fully healed. It may take several months for your scar to fade but eventually it should blend into the natural folds and contours of your face.

What are the possible risks?

Bleeding from the wound is unlikely to be a problem. If this occurs it usually does so within the first 12 hours of surgery, which is why you need to stay in hospital overnight.

Infection is uncommon but if your surgeon thinks it may happen to you, a short course of antibiotics will be prescribed.

Sometimes saliva leaks out of the wound (salivary fistula). This problem usually settles down on its own but can take several weeks to get better.

The Surgeon tells me that damage to nerves is possible.

What does that mean?

The facial nerve runs directly through the centre of the parotid gland. It is this nerve that makes the muscles of the face work. Damage to some or all of that nerve can result in weakness of the muscles on one side of your face.

Most nerve damage occurs as a result of bruising since the facial nerve is held out of the way and protected during surgery. If nerve damage occurs it is usually temporary, although it can take several months to recover fully.

Patient Information

The nerve that supplies feeling to your earlobe (greater auricular nerve) sometimes requires removal to gain access to the parotid gland and as a result you may end up with a numb or tingling feeling in your earlobe.

Is permanent nerve damage possible?

Although the majority of damage to the nerves is temporary, permanent damage is possible. This usually only occurs in the most difficult cases.

Are there any long term effects if I have my parotid gland removed?

The removal of one parotid gland will not have an impact on the amount of saliva that you produce. There are many other salivary glands left in and around the mouth that will keep it moist.

Some patients notice that the skin in and around the ear sweats excessively after the parotid gland has been removed (gustatory sweating, Frey's syndrome). This sweating is particularly noticeable around mealtimes when the skin can also turn red and feel warm. If this occurs it can usually be alleviated with simple treatments that do not require further surgery.

Adapted from:

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Available from <http://www.baoms.org.uk>

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