EP-082

혀 결손 재건에서 VRAM 피판의 유용성

(Revisiting the VRAM Flap: a Reliable Option for Total Tongue Reconstruction)

순천향대학교 부속 서울병원

윤현민, 탁민성★

Purpose: Tongue reconstruction requires a sufficiently bulky flap to facilitate optimal postoperative functional recovery, particularly for swallowing and articulation. Although the anterolateral thigh (ALT) free flap is widely preferred, the vertical rectus abdominis myocutaneous (VRAM) free flap may serve as a reliable alternative. This study evaluates our clinical experience with VRAM free flaps for tongue reconstruction and assesses their functional and surgical outcomes.

Methods:A retrospective review was conducted of eight patients who underwent tongue reconstruction using a VRAM free flap between 2022 and 2025. Seven patients underwent total glossectomy, and one underwent hemiglossectomy. The mean follow-up duration was 12 months. Postoperative outcomes, including flap survival, complications, maintenance of muscle bulk, and tolerance of oral intake, were assessed.

Results: Complete flap survival was achieved in all patients. Partial necrosis occurred in three cases; however, the underlying muscle bulk remained intact, and all patients improved following minor revision procedures. At the final follow-up, seven patients were able to tolerate a soft diet, whereas one patient required L-tube feeding despite preserved swallowing ability. No donor-site complications were observed, and flap bulk was satisfactorily maintained throughout the follow-up period.

Conclusion: Although the ALT free flap remains the preferred option for tongue reconstruction, the VRAM free flap provides stable long-term bulk maintenance and satisfactory functional outcomes. It may be particularly advantageous in cases requiring substantial volume preservation and should be considered a valuable option in the reconstructive surgeon's armamentarium.

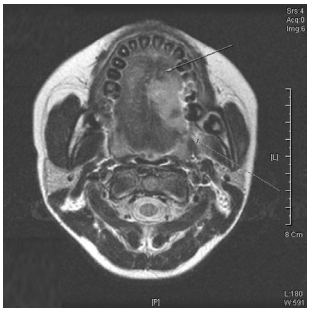

Fig. 1. Preoperative MRI of a 21-year-old woman with biopsy-proven squamous cell carcinoma shows an approximately 4cm ulcerating mass on the left side of the tongue (arrow).

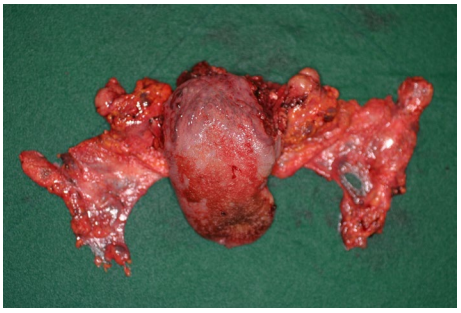

Fig. 2. Resected specimen following total glossectomy and bilateral supraomohyoid neck dissection (SOND) performed via a pull-through approach by the ENT department.

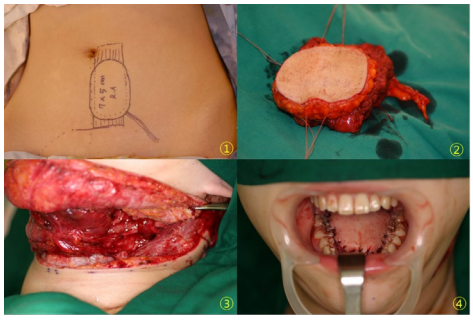

Fig. 3. Harvest of a vertical rectus abdominis myocutaneous (VRAM) free flap with a 7 × 5 cm skin paddle (1,2). Microvascular anastomosis to the superior thyroid artery and vein is shown (3), followed by immediate postoperative appearance (4).

Fig. 4. Postoperative finding at 7 months, showing satisfactory healing without complications.