Transoral Endoscopic Thyroidectomy Vestibular Approach (TOETVA)

Patient Information Sheet

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Video Explanation: https://youtu.be/iT5jSgixOWY

Open thyroidectomy is currently the standard surgery option for thyroid diseases. However, this approach unavoidably leaves a visible neck scar.

Many modified techniques have been developed to reduce the size of the neck scar. Recently, Natural Orifice Transluminal Endoscopic Surgery (NOTES) for thyroidectomy was developed over the past 10 years. This surgical technique completely avoids visible scarring by means of an approach through the oral cavity.

This scarless thyroidectomy is a minimally invasive technique to remove diseased thyroid glands without leaving any visible scars anywhere on the body. The surgery is performed laparoscopically through small incisions on the inner surface of the lower lip without any external neck incisions. The inner lip incisions will completely heal, leaving no evidence of surgery.

This approach avoids any external, visible scars to the neck or other body areas while allowing safe and complete removal of thyroid glands.

The conventional thyroidectomy scar has become significantly smaller over the last several decades, and in general these scars heal well over time. However, the conventional approach will always leave visible scarring on the neck that is not easily hidden. This truly scarless approach will leave no external evidence of the procedure.

Anyone who needs an operation to remove the thyroid or parathyroid glands is a potential candidate for the procedure. However, some limiting factors exist, such as the size of the affected gland and the underlying condition.
People with the following diagnoses may be candidates for the scarless thyroid surgery:

- Benign thyroid nodule less than 6 cm
- Thyroid cancer nodule less than 2 cm
- Thyroid removal for benign conditions
- Primary hyperparathyroidism
- Some secondary or tertiary cases of hyperparathyroidism

Healed “scar” 2 weeks post-surgery using the Transoral approach →

The laparoscopic operation is carried out under general anaesthesia, so the patient is completely asleep during the entire operation. The surgeon makes three small incisions
on the inner surface of the patient’s lip to insert surgical instruments and a high-resolution camera. These small incisions are closed after the thyroid/parathyroid gland is removed, leaving no external scarring.

After the procedure, patients will stay in the hospital overnight so we can monitor their recovery from surgery and anaesthesia. The next day they are discharged and instructed to take oral antibiotics, pain medications and mouth rinses at home for several days following. Small stitches used during surgery will dissolve, and minor bruising on the chin and neck typically clears up within two to seven days.

The scarless thyroidectomy procedure has equivalent cure rates to conventional thyroidectomy through neck incisions. As with any surgery, some risks are associated with this procedure. However, for the vast majority of patients, both approaches are highly safe and effective operations with a low rate of complications. The scarless approach does not increase the risk of complication.

Potential Complications include:

- Temporary hoarseness
- Temporary hypoparathyroidism
- Seroma
- Haematoma
- Pain
- Mental nerve injury
- Infection
- Injury to other structures
- Conversion to open procedure
- Reaction to General Anaesthesia

Official Website

The above information is also available at our official website paulredmondsurgery.com