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## Substitution of failed radial forearm flap by reverse pectoralis major myocutaneous flap for reconstruction intra and extra oral defects

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Abstract **Full Text**

**Background:** The goal of this study was to determine the outcome in patient who underwent unsuccessful radial forearm flap and substituted by using reverse pectoralis major myocutaneous flap.

**Objectives:** Failure after oral reconstruction using free flap frequently happen, and their management remains a challenging problem for surgeons. This study analyzes the causes and the subsequent treatment of a free flap failure and consideration of a secondary flap reconstruction. Pectoralis major flaps have been the workhorse in oral and maxillofacial reconstruction till date. However, pectoralis major flaps also have disadvantages, including limitations regarding pedicle length, and less stable blood flow. Here we report on the safe reconstruction using reverse pectoralis major myocutaneous flap, a technique modification with more stabilized blood flow.

**Method:** A 43-year old male patient who had total radial forearm flap necrosis and substituted using reverse pectoralis major myocutaneous flap was observed.

**Findings:** No ischemia or congestion were observed after replacing the failed free flap with the reverse pectoralis major myocutaneous flap. And no post operative complication such as hematoma, abscess, or fistula were observed.

**Conclusion:** After a free flap failure, surgeons should determine subsequent treatments. Surgeons should consider the need of a second flap and some modification to solve the problems, and analysis of the first flap failure should be noticed.

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