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[\[PDF \(274K\)\]](#) [\[References\]](#)**Nasolabial Flap Reconstruction of Floor of Mouth**[Chihaya Ikeda](#)¹⁾, [Akira Katakura](#)¹⁾, [Nobuharu Yamamoto](#)¹⁾, [Isao Kamiyama](#)¹⁾, [Takahiko Shibahara](#)¹⁾, [Norio Onoda](#)²⁾ and [Hidetoshi Tamura](#)²⁾*1) Department of Oral and Maxillofacial Surgery, Tokyo Dental College**2) Department of Oral and Maxillofacial Surgery, Kameda General Hospital*

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Abstract: We treated two patients requiring nasolabial flap reconstruction. The first patient was a 75-year-old man with mucoepidermoid carcinoma in the left-side floor of the mouth; requiring resection of the floor of the mouth, partial mandibulectomy, and left supraomohyoid neck dissection. The second patient was a 74-year-old man with recurrent acinic cell carcinoma in the anterior oral floor infiltrating as far as the mandible. This patient required wide excision of the anterior part of the oral cavity, including amputation of the mandible. After tumor resection, both cases had a nasolabial flap reconstruction. The postoperative course of both cases was good; neither postoperative flap necrosis nor infection developed.

Key words: [Oral cancer](#), [Oral reconstruction](#), [Local flap](#), [Nasolabial flap](#), [Intraoral defect](#)[\[PDF \(274K\)\]](#) [\[References\]](#)Download Meta of Article [\[Help\]](#)[RIS](#)[BibTeX](#)

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