Physiotherapy for patients recovering from head and neck surgery

This leaflet is for patients who are having surgery for conditions affecting their mouth, jaw, face and/or neck. It explains how physiotherapy can help you recover from your operation.
What is physiotherapy?
Physiotherapy is a treatment that you actively participate in, rather than something you just have done to you. It works best when you work together with your physiotherapists to help yourself recover. They will guide you with advice and information about what you can do to help yourself after your operation.

The role of the physiotherapist
The physiotherapist will assess your needs, identify any problems which can be helped by physiotherapy, and devise an individual treatment plan for you.

You will normally be assessed the day after your operation, and will be seen as required until you leave hospital, or until input from the physiotherapist is no longer needed.

Physiotherapy may consist of:
- advice about your posture
- chest clearance techniques
- general mobility rehabilitation (moving around)
- exercises for any flap donor-site (where tissue has been removed and donated to your reconstruction)
- neck, shoulder and jaw exercises.

Your physiotherapist will be able to give you more information.

If there is anything you are unsure about, please ask someone caring for you.
Posture
After your operation please be aware of your posture. Try not to ‘slump’ or round your shoulders. Try to sit and stand upright, with your head up and shoulders and upper back pulled back and down. When sitting, it may help to put a pillow under your forearm to provide support and avoid strain on your neck or shoulder.

Along with the other advice in this booklet, maintaining a good posture will help to open up your airways after your operation, and avoid complications such as chest infection and neck/shoulder pain.

Chest clearance techniques
Everybody’s lungs produce phlegm as part of their natural clearing system. After a general anaesthetic, this clearing system slows down and phlegm can build up. Long operations can also reduce the amount of air that you can get into your lungs. Both of these things can cause problems.

Your physiotherapist will work with you to help improve your breathing. This may involve some chest clearance and breathing exercises (see diagram).
You should try these **breathing exercises every 1 to 2 hours starting as soon as you can after the operation.**

Regular airway clearance (for example, coughing) will not do any damage to your wound and will help prevent a chest infection. You may also be advised to support your wound (for example by placing a hand over your dressings while you cough).

**General mobility rehabilitation**
- In the first few days after your operation, it is important that you get up out of bed and start moving around. Walking helps your lungs to re-expand and encourages good circulation.
- Generally, the day after your operation you will be helped to get out of bed and sit in a chair. There are exceptions to this with certain types of surgery.
- Gradually increase the distances you are able to walk until you are fully mobile again. **Aim to walk at least the length of the ward 3 to 4 times per day, if you can.**
- Before going home from hospital, you may need a stair assessment to make sure that you are safe and confident getting up and down stairs when you go home.
**Donor flap site exercises**

An area of tissue or bone may be used to reconstruct the inside of your mouth when tissue is removed. This is called a flap. The area where the flap was taken from is called the donor flap site. This will need to be exercised to restore the movement you had before surgery.

Common donor flap sites include:
- the front of the chest
- part of the forearm
- the shoulder blade
- the front of your thigh
- the fibula bone in the lower leg
- the rim of your pelvis
- part of your abdomen/tummy.

Your physiotherapist will give you an exercise sheet, specifically for the type of surgery you are going to have.

**Neck and shoulder exercises**

- For the first few days while your drains are in, don’t actively exercise your neck, shoulders or jaw – just move about gently and as normally as you can. This will allow your wound to settle and start to heal.
- Once any drains are removed, you will be given some gentle exercises to improve movement and reduce swelling, pain and stiffness. Stretches can help to prevent a tight scar.
During surgery, the nerves in the area may be stretched, bruised or cut. If this happens, the messages from the nerves may not reach the muscles. This can lead to reduced movement, particularly in the face and shoulders, and can mean recovery takes a little longer.

**How often and for how long should I do these exercises?**

It is always best to do ‘little and often’, rather than lots of exercises at one time. **Exercising 2 to 3 times a day for 5 to 10 minutes is best.** Your physiotherapist will be able to advise you exactly what to do.

Even if you have regained full movement and strength, **please continue with your exercises for up to 3 months after your full treatment programme is complete (including any radiotherapy), and longer if you have any ongoing problems.**

**Jaw exercises**

Sometimes, jaw opening can become restricted after surgery. This can lead to problems with being able to open your mouth enough to eat, speak, clean your mouth or be examined.

Be aware of how much your mouth can open. Your physiotherapist may give you additional exercises specifically for your jaw at an appropriate time point after your surgery.
Other things you can do, before and after your operation, to help your recovery

Keep active
Try to keep as active as you can (for example, go for regular walks or there is a small gym area on the ward). This can help maintain a level of fitness to see you through your treatment period. If you feel tired, try doing a little and often, rather than a lot in one go. It is important to listen to your body.

Aim to build up towards achieving 10 minutes of activity that makes you slightly to moderately breathless, whilst on the ward. Gradually increase this (to either 3 x 10 minutes or up to 30 minutes at one time) when out of hospital. Strengthening activities (for example, standing up and sitting down repeatedly, or stair climbing) should be performed at least 3 times per week.

If you would like further advice about physical activity, please ask your health professional.

Good nutrition
For your wounds to heal, good nutrition is vital (both eating healthily and getting enough calories). This will help you get back to your normal activities. Please follow the advice from your dietitian, and any swallowing advice from your speech and language therapist.

Avoid smoking
This will help your wound to heal and can help to avoid many other problems, such as any cancer returning. Please ask your health professional if you would like support to help quit smoking.
Post-operative scar massage
Massaging the scar can help to improve the size and appearance of your scar and the range of movement at your neck. Massage should only be started once the wound is fully healed (when there are no scabs or open areas) and you have finished any radiotherapy.

- Use a moisturising cream (non-perfumed if you are concerned about skin irritation).
- Gently press on your scar, moving it and the surrounding tissue with your fingers.
- Make small circles, moving the skin over the tissue underneath, rather than rubbing on the skin surface.
- Massage for about 5 minutes, 2 to 3 times a day.

If you notice any change in the appearance of your skin, for example, it becomes redder, painful or starts to ooze, then stop the massage and speak to your physiotherapist.

Returning to normal activities
Providing there are no problems with your wound healing, try to return to normal activities (such as washing and dressing yourself) while in hospital.

You can start to do some light domestic chores as soon as you go home. Try to build up to longer/heavier tasks gradually.

For the first six weeks after your operation, try to avoid heavy activities such as hanging out wet washing, and lifting anything heavier that a full kettle, for example shopping bags or children. Do not swim until your wound is fully healed.
If you drive, ask your consultant when it is okay to return to driving – a minimum of two weeks without driving would be advisable. The main considerations for driving are:

- What are the effects of any painkillers you may be taking? For example, do they make you feel drowsy?
- Can you turn your head to look in blind spots without pain or stiffness?
- Can you comfortably tolerate holding your arms on the steering wheel for the necessary length of time?
- If you have had a flap from a part of your leg, could you comfortably hop on that leg? This will be an indication of your ability to operate the brake or clutch to do an emergency stop.

If you want to return to driving, it may be worth trying it out in a quiet area with family/friends first, before going out in traffic.

Please refer to information on the DVLA website, w: www.dvla.gov.uk.

**Follow-up**

You may be referred for ongoing physiotherapy when you leave hospital. This is to prevent future problems with neck, shoulder, jaw or flap donor site movement and pain. The amount of physiotherapy you receive will depend on your individual needs. If at any point a problem reappears or you develop a new problem, please speak to your health professional.
Contact us
If you have any questions or concerns about physiotherapy following head and neck surgery, please contact:

- The Guy’s outpatient physiotherapy department, 
  t: 020 7188 5099 and ask for the head and neck outpatient physiotherapist.
- The head and neck inpatient physiotherapists, 
  t: 020 7188 5110/5106, 
  or hospital switchboard, 
  t: 020 7188 7188, and ask for bleep 2136 and 0694.

Please leave a message if your call is not answered and someone will call you back, Monday to Friday, 8.30am to 4.45pm.

For more leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets
Useful sources of information

Pharmacy Medicines helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
\textbf{t:} 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
\textbf{t:} 020 7188 8801 (PALS) \hspace{1cm} \textbf{e:} pals@gstt.nhs.uk
\textbf{t:} 020 7188 3514 (complaints) \hspace{1cm} \textbf{e:} complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch.
\textbf{t:} 020 7188 8815 \hspace{1cm} \textbf{e:} languagesupport@gstt.nhs.uk

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
\textbf{t:} 111

NHS Choices – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.
\textbf{w:} www.nhs.uk