

# SPRINGFIELD ENT & FACIAL PLASTIC SURGERY

3555 South Culpepper Circle  
Springfield, Missouri 65804  
(417) 887- 3855 / [www.springfieldent.com](http://www.springfieldent.com)

---

## INSTRUCTIONS AND INFORMATION GENIOGLOSSUS ADVANCEMENT AND HYOTHYROID SUSPENSION

Dear Patients: we wish your surgical experience to be as **positive** and **free of stress** as possible. Please contact our office if you have any concerns - remember, there **are no silly questions!**

**PLEASE, NOT TAKE ASPIRIN, MOTRIN, IBUPROFEN, ADVIL AND SIMILAR NON-TYLENOL PAIN RELIEVERS FOR 2 WEEKS BEFORE AND AFTER SURGERY. THESE INCREASE THE RISK OF BLEEDING!**

**Reasons for performing this surgery:** severe obstructive sleep apnea (OSA)

**Alternatives to surgery include the following:**

- **Weight loss** - may significantly help snoring and obstructive sleep apnea
- **Tracheotomy** - usually performed for only the most severe OSA.
- **No treatment** - simply watching the problem to see if it improves on its own
- **CPAP** - treatment with continuous positive airway pressure - very effective and almost risk-free.
- **Uvulopalatopharyngoplasty / Tonsillectomy** - performed alone without genioglossus advancement / hyothyroid suspension.
- **Oral Surgery** - to move the upper and lower jaw forward (for severe sleep apnea).

**Risks of not treating obstructive sleep apnea:**

- Risk of heart and lung disease.
- Increased risk of high blood pressure.
- Increased tiredness / sleepiness.
- Risk of falling asleep while driving or performing similar activity.
- Decreased quality of life due to the above.

This surgery is usually combined with uvulopalatopharyngoplasty (UPPP) to help airway obstruction at the soft palate area or UPPP may have already been performed and not provided and adequate result. Nasal surgery may be included if there is obstruction of breathing in the nose

**What to expect with this surgery:**

- **Anesthesia** - performed with general anesthesia - patients are completely asleep
- **Incisions**
  - **Genioglossus advancement** portion involves making an incision about 2 inches long in the mucous membrane in front of the bottom front teeth and behind the lip. A piece of the mandible (jawbone) is cut and pulled forward to bring the tongue base forward. This bone is secured to the jaw in this more forward position.

- **Hyothyroid suspension** involves making an incision about 2 inches long in the neck above the larynx ("Adam's apple) and suturing the hyoid bone to the thyroid cartilage (cartilage of "voice box"). Its purpose is also to bring the tongue base forward.
- Surgery lasts several hours, depending whether other procedures are also done at the same time.
- Patients with obstructive sleep apnea usually are admitted to the hospital on the day of surgery and remain in the hospital for about 2 days.

**What to expect after surgery:**

- **Pain** - this surgery is moderately painful. You will be given a prescription for pain medication. Most of the discomfort associated with this comes from the UPPP / tonsillectomy which is often performed at the same time. This medication can cause nausea; it may help to take it with food.
- **Activity** - Plan to rest for at least the first several days after surgery, then increase activity as tolerated. Avoid exercise or heavy exertion for at least 3 weeks.
- **Work & School** - plan to take 2 weeks of work and school.
- **Fever** - low-grade fever is common if the UPPP / tonsillectomy is also performed.
- **Voice & Swallowing** - you may notice a change right after surgery.
- **Nausea** - Common the night after surgery and may be due to anesthesia medicines or some swallowed blood in the stomach.
- **Mouth Rinsing** - an antibacterial mouth rinse may be prescribed. Swish 1 tablespoon in mouth 4 times daily for 1 week after surgery. You may also rinse with warm salt water several times daily for 2 - 3 weeks after surgery. Use 1/2 tsp salt in 8 oz warm water.
- **Tooth Brushing** - may be resumed after surgery. Be careful of incision in front of lower teeth.
- **Sutures / Stitches** - sutures in the mouth self - dissolve. The sutures in the neck will be removed about 1 week after surgery during your office visit.
- **Diet:** Begin with liquids the first day and then advance to a soft diet as tolerated. Avoid food that requires a lot of chewing. Your diet will be limited mostly by the sore throat due to UPPP / tonsillectomy if this is also performed. Please see that separate surgical instruction sheet for dietary advice.

**Risks of surgery include:**

All surgery involves certain risks, including bleeding, infection, reaction to anesthesia and medications, or even death. These procedures are usually safe but some of the risks include:

- Injury to the mouth, throat, voice, and swallowing mechanisms & structures.
- Injury to teeth, teeth roots, dental implants, mandible (jaw bone) including jaw fracture.
- Injury to nearby structures.
- Possible need for other surgery or treatment such as CPAP
- Chin numbness

We appreciate the opportunity to participate in your healthcare! Please let us know how we may make your surgical experience more pleasant!

**Springfield ENT & Facial Plastic Surgery**