

Our Experiences of the Pharyngeal Flap Surgery for the Cleft Palate Patients by Hogan's Technique

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Introduction: The superior based pharyngeal flap surgery is the most widely used surgery still now for the cleft palate patients with velopharyngeal incompetence (VPI) characterized by hypernasality among the pharyngoplasty. However, there may be a few considerable problems when performing this procedure. One is the late displacement and deformity of the pharyngeal flap caused by the scar contraction as a natural consequence of the raw area left at the base the pharyngeal flap. The other is the contradictory problem about the control the size of lateral port or orifice which means the space between alteral pharyngeal wall and margin of the flap. If it is too large, a VPI will remain. If it is too small, a disturbance of nasal breathing at rest will be caused immediately after surgery.

Purpose: It is necessary to eliminate the raw surface of the pharyngeal flap and on the posterior pharyngeal wall, and to be able to control the size of the lateral port during any surgery. As we guessed that Hogan's technique on 11 cleft palate patients with VPI.

Results: We evaluated the before and after speech changes by clinical judgement or with Nasometer. We got the satisfactory results.

Discussion: The pharyngeal flap surgery by Hogan's technique is an easy procedure which have indispensable conditions to obtain a precise surgical goal.