A novel transoral endoscopic thyroidectomy with exposed mental nerve for benign thyroid nodule

Purpose
To evaluate the feasibility and results of a novel transoral endoscopic thyroidectomy with exposed mental nerve for benign thyroid nodule.

Method
31 patients with benign thyroid tumors underwent endoscopic surgery by modified transoral endoscopic thyroidectomy with exposed mental nerve via oral vestibular approach at our hospital between July 2016 and December 2017. 45 patients were enrolled as controls by conventional approach. Two groups were compared with regards to tumor size, types of operation, operation time, bleeding, volume of drainage, complication and postoperative hospital stay.

Result
No statistical significance was found in volume of drainage, postoperative hospital stay and complication between two groups. Endoscopic group: no permanent glottic paralysis; One patient had transient hoarseness and recovered after 3 months. In one case, subcutaneous seroma was noted. One patient suffered from subcutaneous emphysema. One patient had an epidermal damage of the ala nasi on the side of the nasal intubation, and recovered after one week. no permanent glottic paralysis; One patient had transient hoarseness and recovered after 3 months. No local infection at the incision site or within the cervical spaces occurred. No mental nerve palsy was observed. Conventional group: Two patients occurred transient hoarseness and recovered in 3 months. no permanent recurrent nerve paralysis occurred; One patient had local infection; 1 cases of postoperative hematoma occurred after 8 hours later. The average blood loss of endoscopic surgery was \((20 \pm 4)\) ml, and the mean of operation time was \((107 \pm 11)\) min, there was a statistical difference between the endoscopic surgery and the conventional surgery.

Conclusion
The novel transoral endoscopic thyroidectomy with exposed mental nerve is feasible and safe, giving excellent cosmetic results.

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