

# Review of: "Assessment of the differences in the use of free iliac flap for maxillomandibular defects with patient-reported outcomes"

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This article is very good in respect that the reconstructive options for such patients needs to be reported in terms of case mix, operative details, morbidity, patient reported outcomes.

Surgeons outcome is less frequently reported these days as there is inter-surgeon variability, they tend to report good outcomes, and these might not reflect, and are arguably less important, than the patient perceived outcome.

There is a lot of detail in the paper. It is strengthened by the inclusion of consecutive patients but this is over a 10 year period and reflects that the reconstruction is not common compared say to fibula or scalpula. The report reflects the challenges in this surgery for example the free flap compromise. The incisional hernia rates are low. The use of osteotomies is interesting, as is the reporting of implants. The report shows the value of DCIA flap in selected cases.

Four cases are illustrated and this is useful.

The limitations are a small sample, a mixed group of aetiology (in the cancer group post-operative radiotherapy makes a big difference in outcomes), a cross-sectional review, lack of commonly used patient reported outcome measures (a gap as there are several available), nor complication reporting. There is insufficient comment around the limitations of the project. There is no comparison group.

This paper will be of interest to the readership in spite of its obvious shortfalls.