

## INTRODUCTION

The use of myocutaneous flap is an advance in the reconstructive surgery.

The development of these myocutaneous flaps has ushered in an era of one stage reconstruction that have already changed the pattern of plastic surgery; these flaps are extremely vascular and can provide large amount of tissue.

The myocutaneous flaps are based upon the principle that in most regions of the body the skin derives its blood supply not from specific cutaneous vessels but rather from multiple small vessels passing to the skin from underlying muscle (Daniel and Williams, 1973).

The myocutaneous flap can deal with defects resulting from congenital deformities, trauma and burns; however its most impressive use is for the immediate recontruction after wide excision in head and neck cancer and in areas having

had previous heavy irradiation.

One of the most commonly and recently used myocutaneous flap is the "PECTORALIS MAJOR MYOCUTANEOUS FLAP". This flap was at first used mainly for reconstruction of shoulder, chest and axillary defects (Ariyan 1979). Recent improvements in the design of pectoralis major myocutaneous flap have greatly increased its versatility by rendering it suitable for head and neck reconstruction.

The aim of this work is to illustrate pectoralis major myocutaneous flap in patients with head and neck cancers at different sites.