Skin Flaps and Grafts in Dermatology

During skin surgery we sometimes use flaps or grafts to repair skin defects resulting from removal of skin cancers. They are used when there is not enough loose skin around the wound to simply stitch the sides together. The procedure is done under local anaesthetic with injections into the skin to numb the area.

What is a skin flap?

A skin flap is the term given to covering the wound / defect with a piece of adjacent skin that is moved into the area by making further cuts in the skin.

Advantages of flaps:

- The skin comes from beside the wound, so is usually a good match for colour and texture
- The moved skin is still attached to the body, so has a better blood supply than a skin graft, making it more likely to heal quickly and survive in its new position.

Disadvantages:

- More cuts are required around the wound, leading to more scars. Where possible, these are hidden in natural skin creases or lines.

What is a skin graft?

Skin grafts use skin taken from one area of the body (donor site) and placed on an area where a skin cancer has been removed (recipient site).

Under local anaesthetic, donor skin of a size to match the defect is usually taken from around the ears, neck or collar bone area. We try and match the colour, texture, and thickness of the donor site with the recipient site.

The graft is trimmed to the exact size and shape of the recipient site. Both donor and grafted sites are closed with stitches and covered with a dressing, which helps prevent bleeding or infection. There may be a dressing stitched onto the graft itself, which stays on until the stitches are removed.

Advantages of grafts:

- A simple technique to cover a wound, which usually results in faster healing times than leaving it open to heal by itself

Disadvantages:

- Two wounds are created instead of one
- The graft may look different from the surrounding skin once it has healed.
- Sometimes part or all of the graft may not survive in its new location, which can lead to a scabbed graft and longer period of healing

Wound care:

Any skin surgery runs the risk of scarring, bleeding and wound infection.

For ideal healing, wounds should remain clean and moist by regular cleaning and then covering with an ointment or dressing.

You will get specific instructions about caring for your wound/s and when to have stitches removed, but you will usually be asked to keep your dressings dry for a few days. After this time, carefully wash the graft and donor sites with soap and water before putting on clean dressings or an ointment. Change your dressings every time they get wet or dirty.
Some do’s and don’ts:

- Avoid smoking or vaping, since nicotine reduces blood supply to the healing areas. This is especially important for skin grafts.
- If the area is sore, take paracetamol regularly. Do not take aspirin unless you are on it for other reasons, as this can increase the risk of bleeding.
- It is normal to expect some oozing of blood from the wound. If you notice any bleeding, apply firm constant pressure with a clean cloth for 15 to 20 minutes (keep the pressure on continually). If for any reason you are unable to stop the bleeding, please return to us or your local GP surgery or if out of hours go to your nearest Accident and Emergency department.
- Wound infections are possible after skin surgery, and generally happen around 3-7 days following the operation. Signs to look for are increase in pain, redness, heat, swelling and/or leakage of pus / blood stained fluid. If you notice these symptoms or you are concerned, please contact us or your GP.
- Avoid any excessive movement to the area, such as stretching / lifting or vigorous exercise.
- Keeping to a healthy, balanced diet may improve wound healing.

What should I expect it to look/feel like?

- Flaps or grafts may look a dark dusky pink/purple colour after a few days. This usually improves with time, but sometimes the top surface of the graft doesn’t survive and will lift off as a scab after a week or two. The base of the wound should still heal well underneath. Please contact the dermatology department if you are concerned about the appearance of your wound.
- The scars may be numb/itchy or uncomfortable for several months due to small nerves regrowing in the area.
- Scars may become paler or darker than the surrounding skin. It is a good idea to protect the area from excessive sunlight in future.
- It can take up to 18 months for the scar to reach its final appearance. Regular massage with an unperfumed moisturizer is likely to improve the appearance. Silicone gels formulated to improve scars can be helpful for thickened scars and can be bought over the counter.

When will I know if all of the cancer has been removed?

It takes on average 4-5 weeks to have the results back in the department after your operation. We will write to you directly and send a copy of the letter to your GP. If after six weeks you have not had a letter, please contact us on: 01392 405510

If your results show that your skin lesion was not completely removed, you may be asked to come back to the hospital for a further operation.

Contact us:

If you have any questions or concerns please contact the Dermatology Department, Level 1, Heavitree Hospital, on 01392 405516 and leave a message for a member of the team to contact you back.

If you need any additional information, advice or support, you can contact the main hospital Patient Advice and Liaison Service:

rde-tr.PALS@nhs.net,; 01392 402093.

Useful websites for support/ further information:

- www.skinsupport.org.uk/conditions-details/skin-cancer
- www.bad.org.uk
- www.macmillan.org.uk
- www.dermnet.org.nz