

Postauricular incision versus conventional transcervical incision in second branchial cleft cyst excision: A systematic review and meta-analysis

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Surgical removal is the treatment of choice for second branchial cleft cysts (SBCCs), which are a congenital anomaly. The purpose of this meta-analysis was to evaluate the differences between the post auricular and conventional Trans cervical approaches in SBCC excision. A systematic review was performed using PubMed, Embase and the Cochrane Library to identify studies comparing outcomes of SBCC surgery via the post auricular and conventional Trans cervical approaches. The data of interest were analyzed with Comprehensive Meta-Analysis software (version 3; Bio stat, Englewood, NJ). Dichotomous data and continuous data were analyzed by calculating the risk difference (RD) and the mean difference (MD) with the 95% confidence

interval (CI), respectively. Three studies were eligible for the final analysis. The pooled analysis demonstrated that the cosmetic satisfaction score was significantly higher with the post auricular approach (MD, 2.16; 95% CI, 1.15 to 3.16). The operative duration was significantly longer with the post auricular approach than with the conventional Trans cervical approach (MD, 12.81; 95% CI, 2.39 to 23.23). The incidence of postoperative marginal mandibular nerve palsy (RD, 0.00; CI, -0.09 to 0.09), bleeding complications (RD, -0.02; CI, -0.09 to 0.05), and salivary complications (RD, -0.00; CI, 0.07 to 0.06), as well as the cyst size (MD, 0.02; CI, -0.96 to 0.99) and length of hospital stay (MD, -2.50; CI, -7.30 to 2.30), were comparable between the two groups.

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