



# **NUTRITIONAL ASSESSMENT IN PATIENTS UNDERGOING HEAD AND NECK SURGERY**

*This is to certify that the dissertation titled  
NUTRITIONAL ASSESSMENT IN PATIENTS UNDERGOING HEAD  
AND NECK SURGERY is done by Dr. Deepika Nagnur under  
my personal guidance, supervision and to my  
satisfaction. I certify that the study is original  
and authentic.*

This dissertation is submitted to  
the Karnatak University in  
partial fulfillment of the regulation for  
M.D.S. (Oral & Maxillofacial Surgery) Degree  
Examination of  
February 1995

  
Dr. Paul C. Salins M.B.S., M.D.R.C.S.  
Professor  
Department of Oral and Maxillofacial Surgery  
S.D.M. College of Dental Sciences  
DHARWAD

  
Dr. C. Bhasker Rao M.B.S.  
Professor and Head  
Department of Oral & Maxillofacial Surgery  
S.D.M. College of Dental Sciences  
DHARWAD

By  
**Dr. Deepika Nagnur**

Health according to the World Health Organization is defined as, 'a positive sense of physical, mental and social well-being'. The state of health is often compromised by abnormalities in the nutritional status and this is especially true in chronically ill patients undergoing surgery.

The success of medical and surgical therapy depends on the nutritional status, since a high risk of morbidity and mortality threatens the poorly nourished patient. In this patient group, often times a seemingly trivial adverse clinical event sets in motion a cascade of complications that may result in major sepsis, critical organ failure and death. Attaining or maintaining adequate nutritional status in these patients may tip the balance towards improved success rate. Appropriate patient selection for nutritional repletion before major medical or surgical intervention leads to a shorter, less complicated intensive care stay and improved patient outcome. Maintenance of the nutritional status of the patient with major trauma, burns, malignancy or unforeseen surgical complications is facilitated by reliable baseline and serial nutritional assessment and is almost certainly accompanied by decreased patient morbidity and mortality. Particularly in Oral and Maxillofacial surgery, patients who are unable to take orally because of pain in the surgical area, intermaxillary fixation or risk of contamination of the surgical area, nutritional repletion and