

Cyanoacrylate instillation for occlusion of parotid sinuses

HealthTech guidance

Published: 25 February 2004

www.nice.org.uk/guidance/htg20

Your responsibility

This guidance represents the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take this guidance fully into account, and specifically any special arrangements relating to the introduction of new interventional procedures. The guidance does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

All problems (adverse events) related to a medicine or medical device used for treatment or in a procedure should be reported to the Medicines and Healthcare products Regulatory Agency using the [Yellow Card Scheme](#).

Commissioners and/or providers have a responsibility to implement the guidance, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this guidance should be interpreted in a way that would be inconsistent with compliance with those duties. Providers should ensure that governance structures are in place to review, authorise and monitor the introduction of new devices and procedures.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should [assess and reduce the environmental impact of implementing NICE recommendations](#) wherever possible.

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This guidance replaces IPG42.

1 Recommendations

- 1.1 Current evidence on the safety and efficacy of cyanoacrylate instillation for occlusion of parotid sinuses does not appear adequate for this procedure to be used without special arrangements for consent and for audit or research.
- 1.2 Clinicians wishing to undertake cyanoacrylate instillation for occlusion of parotid sinuses should take the following action.
 - Inform the clinical governance leads in their Trusts.
 - Ensure that patients understand the uncertainty about the procedure's safety and efficacy and provide them with clear written information. Use of [NICE's information for the public](#) is recommended.
 - Audit and review clinical outcomes of all patients having cyanoacrylate instillation for occlusion of parotid sinuses. Publication of safety and efficacy outcomes will be useful in reducing the current uncertainty. NICE may review the procedure upon publication of further evidence.

2 The procedure

2.1 Indications

- 2.1.1 Superficial parotid gland surgery may be complicated in about 10% to 15% of patients by the development of an abnormal tract (sinus) between the remnants of the parotid gland and the outer surface of the cheek. The sinus may have unwanted cosmetic effects, and may cause chronic leakage of saliva with excoriation of the cheek.
- 2.1.2 Management of parotid sinuses includes watchful waiting, bandaging, radiotherapy, local denervation of the gland or excision of the deep lobe of the gland.

2.2 Outline of the procedure

- 2.2.1 A solution of lipiodol and cyanoacrylate is injected via the sinus into the parotid gland, sealing the sinus. If the procedure is unsuccessful and symptoms recur, the procedure can be repeated.

2.3 Efficacy

- 2.3.1 The evidence was limited to 1 case report. Although this demonstrated the feasibility of the technique, the report was uncontrolled and did not provide any further information about efficacy and safety. For more details, see the [overview for this guidance](#).
- 2.3.2 No specialist advice was provided for this procedure. The Advisors who were approached were unaware of the technique.

2.4 Safety

2.4.1 See section 2.3.1.

2.4.2 No specialist advice was provided for this procedure. The Advisors who were approached were unaware of the technique.

2.5 Other comments

2.5.1 The procedure appears to have been carried out once, on 1 patient, by 1 clinician. Anyone considering its use may wish to contact that clinician, Mr AJ Marcus of the Edgware Hospital.

3 Further information

Sources of evidence

The evidence considered by is in the [overview for this guidance](#).

Information for patients

NICE has produced [information for the public on this procedure](#). It explains the nature of the procedure and the guidance issued by NICE, and has been written with patient consent in mind.

Update information

Minor changes since publication

January 2026: Interventional procedures guidance 42 has been migrated to HealthTech guidance 20. The recommendations and accompanying content remain unchanged.

ISBN: 978-1-4731-8314-8

Endorsing organisation

This guidance has been endorsed by [Healthcare Improvement Scotland](#).