

Laryngectomy Care

What is a total laryngectomy?

A total laryngectomy is an operation to **completely remove the larynx (voice box)** usually following a diagnosis of cancer. Before surgery the oesophagus (food pipe) and the trachea (wind pipe) meet to form one tube above the larynx, like a dual carriageway going into a single lane.

After a total laryngectomy your food pipe and wind pipe will be permanently separated. Your wind pipe will be brought to the front of your neck to make a permanent opening called a stoma. Your food pipe will be repaired to make a complete tube. This means your lungs will be permanently disconnected from your mouth and nose. The opening in your neck (the stoma) **will be your only airway**. Air will no longer be able to travel down through the mouth and nose so it is vital that the stoma is always managed and kept open and clear so you can breathe.

The major effects of removal of the larynx are permanent loss of normal voice and alteration of the airway.

Stoma Care

The stoma (the opening in your neck) and surrounding skin should be kept clean and dry at all times. The stoma should be inspected for crusts using a good torch and mirror at least twice a day. Crusting can be carefully removed with forceps. Good humidification/filtration is essential in minimising problems. Do not allow secretions to build up around your stoma area or down your wind pipe as it will make you cough and may affect your breathing.

The stoma may contract as part of the healing process and can become smaller. After about 6 months this contraction should settle down. Patients are often discharged from the ward with a small tube called a stoma button or a soft laryngectomy tube in order to keep the stoma at a reasonable size.

We advise you put the soft laryngectomy tube in daily to check the size of the stoma. If the tube begins to feel too much of a tight fit please contact Catherine Hawkes, Trainee Advanced Clinical Practitioner on 07867154088 or the Head and Neck team on 01484 347072. Remember, this is your only airway now so it is important that you seek help if you notice any changes. Report any changes in your stoma such as size, redness or sores to your GP, District Nurse, Speech and Language Therapist (SALT) or Head and Neck Nurse.

Clean the soft laryngectomy tube with cold or warm soapy water under the tap. Dry the outside of your stoma afterwards so your skin is not damp. Using a good light source, check the inside of the tube is clean. Do not probe down into your stoma too deeply. If you are unable to remove the dried secretions ask your district nurse.

The skin around your stoma may occasionally become sore. Apply a cream as directed by your Clinical Practitioner to protect the surrounding skin. Do not put any cream down the stoma.

Humidification and filtration

Normal nasal function is to filter, moisturise and warm the air we breathe.

After a laryngectomy, the nose and mouth are bypassed and inspiration through a stoma has a negative effect on mucosa of the lower respiratory tract. Air inspired is cold and dry, the mucosa can dry out and the ciliated epithelium can be damaged. Good humidification and filtration will help minimise these problems and limit thick secretions.

Looking after the speaking valve (see separate leaflet for full details).

The patient will have been given a small brush to clean any mucus away from the valve so that air can continue to pass through. Gently place the brush in the opening of the valve and twist in one direction pulling out any mucus. This needs to be done 2-3 times a day. After using, the brush should be washed thoroughly in soapy water and allowed to air dry.

When does the valve need changing?

1. If you notice you are coughing immediately or shortly after drinking.
2. If you see food or drink stained secretion on your covers or filters.

The valve should be tested for leakage regularly by drinking milk or a brightly coloured drink that will be visible. It may leak through the middle or around the sides.

If you suspect leakage please contact a professional, see below who will change your valve for you.

- Catherine Hawkes, Trainee Advanced Nurse Practitioner on 07867154088.
Monday - Friday, 8am - 4pm
- ENT Huddersfield 01484 343255
- ENT Calderdale 01422 222336 and ask to speak to Catherine
- Anne-Marie Smith, Specialist Speech and Language Therapist on 01484 347072

Weekends, (after 4pm during the week) and Bank Holidays: Ward 8B at Calderdale 01422 223813.

Please bring with you your valve accessories, and valve record book.

General information

1. During the summer months there may be more flies, wasps etc in the air which may present a hazard to your stoma if it is unprotected. Always ensure you wear a stoma protector or HME (filter) all year round.
2. You need to take care not to get water into your stoma as it will go straight into your lungs. You can use a plastic shower shield to protect your lungs when showering or bathing. These are available on prescription.
3. Do not go swimming unless you have the correct breathing equipment and have had lessons on how to use it. Contact the National Association of Larygectomee Club (NALC).
4. Take care not to spray aerosols such as deodorant or perfume too near your stoma as this may irritate your airway and cause coughing.
5. During hot weather always protect your skin from the sun.

Useful names and contact numbers

Macmillan Head and Neck Team:

Anne-Marie Smith, Zoe Robshaw, Natalie Haigh, and Sarah Topen
Telephone No: 01484 347072

Catherine Hawkes, Trainee Advanced Nurse Practitioner - 07867154088

Karina Ash, ENT Nurse Specialist - 07795092464

ENT Huddersfield - 01484 343255

ENT Calderdale - 01422 222336

The National Association of Laryngectomees Club - 0207 730 8585.

Email: info@laryngectomy.org.uk

Website: www.laryngectomy.org.uk

If you have any comments about this leaflet or the service you have received you can contact :

Anne-Marie Smith

Specialist Speech and Language Therapist

Macmillan Head and Neck Cancer

Huddersfield Royal Infirmary

Telephone No: 01484 347072

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce,
obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych
informacji w innym formacie lub wersji językowej,
prosimy skontaktować się z nami, korzystając z ww.
danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਚੂਰ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ,
ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم
المذكور أعلاه"