

Total Laryngectomy

What is a total laryngectomy?

This is when the larynx (voice box) is removed. An opening or **stoma** is made in the trachea (windpipe) in the front of the neck. Air enters and leaves the trachea and lungs through this opening. A **tracheostomy tube**, also called a **trach (trake) tube**, will be placed to help keep the new airway open until the stoma is healed.

- At first, we will give you humidified air through a mask over your neck to moisten the air you breathe.
- Your lungs may produce a great deal of mucus at first. You will cough mucus out through your stoma.

Caring for Your Stoma and Tracheostomy Tube

You need to take care of your trach tube, your stoma and the skin around the stoma. The nurses will teach you and your family how to take care of your trach tube and stoma when you are getting ready to leave the hospital. We will give you a separate *Health Facts for You*, Trach Care at Home #5340.

The nurse will moisten your stoma every 8 hours at first or more often if you need it. They do this by placing a small amount of saline into your stoma. This will produce a cough reflex that loosens and brings up the mucus.

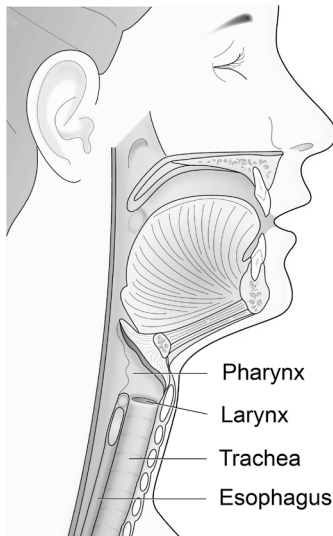
The nurses may use suction through the trach tube to help you cough and remove mucus when you need it.

For a short time, your nurse may also need to suction secretions from your mouth since swelling in the throat makes it hard to swallow.

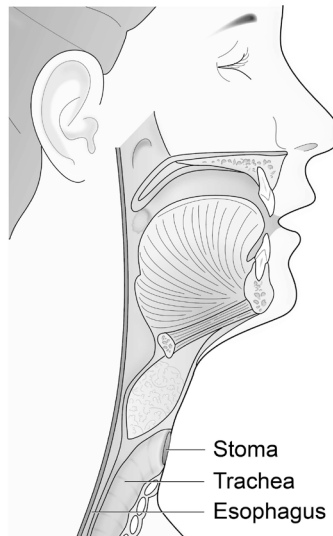
The doctors will change the trach tube after a few days. Your trach tube will stay in place as the skin around the stoma heals.

When the trach tube is removed, it is replaced by a **laryngectomy tube** which is a soft flexible silicone tube that fits just inside the stoma to help protect it. The laryngectomy tube can also hold a heat and

Before Laryngectomy



After Laryngectomy



What can I expect after surgery?

Breathing

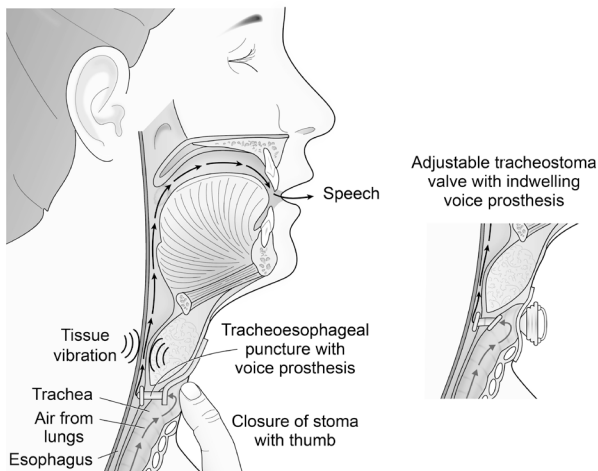
- Your trachea (breathing tube) and swallowing tube are now separate.
- You will be breathing only through your neck (**stoma**). If your stoma is blocked, you will not be able to breathe.
- You will no longer be able to sniff or blow air through your nose.
- Sneezing and coughing will occur through the stoma, not your nose or mouth.
- You will not be able to talk.

moisture exchange (HME). The HME warms, moistens and filters the air you breath.

After a while, some people get along without a laryngectomy tube at times.

How will I talk?

Because your voice box has been removed, you will not be able to talk like you used to. You will need to learn to communicate in other ways. While in the hospital, you can write, use gestures, or point to pictures, words or letters. Some people like to use a magic slate to write notes or use pen and paper. Your nurse will help you find what works best. We will supply paper and pens or pencils. A speech pathologist will meet with you to explain other ways to talk (shown below).



Nutrition

You will not be able to eat or drink after surgery until the area is healing and swelling has gone down. You will take fluids and nutrition supplements through a tube put in place during surgery. This tube is called a “nasogastric tube” (NG), or a smaller tube called a “Dobhoff.” The tube passes through your nose and throat to your stomach. You will be fed through this tube until you are ready to swallow foods again.

Pain

Your nurse will talk with you about using a pain rating scale and what level of pain you may expect. We will give you medicine to help ease pain.

If you had extra surgery to remove the lymph nodes in the neck, your shoulders and neck may be weak and stiff.

What do I need to learn before going home?

When you are ready to learn how to care for yourself at home, your nurse will give you a handout and teach you how to perform the needed steps. We will teach you these cares:

- **Trach or stoma care** which includes skin care and cleaning of the trach tube HFFY #5340.
- **Preventing Tracheitis** HFFY #5317.

You will begin self-care while in the hospital so that you are able to care for yourself before you go home. If other health problems prevent you from doing your own care, we will plan for this. This may include teaching a family member or calling a home care agency to help you.

Follow-Up Care

We will schedule your first follow-up visit for you before you go home. Call your doctor or nurse if:

- Secretions change in color, amount, or texture.
- You have redness or skin breakdown around trach or stoma.
- You have a fever of 100.5°F.
- You have pain not controlled by your medicine.
- You have any questions or concerns.

Emergencies

It may be hard to talk on the phone. Plan a way to get help in case of an emergency. Place emergency numbers near the phone, such as the fire department, ambulance, visiting nurse, or doctor.

During CPR, breathing must be done mouth to stoma, not mouth to mouth. Tell your local Emergency Medical Service that you are a neck breather. Oxygen must be given through the stoma, not the nose or mouth.

You should wear a medical alert bracelet/necklace from a drug store pharmacy. These bracelets/necklaces will inform others that you breathe through a stoma in your neck.

Phone Numbers

ENT Clinic, Monday-Friday 8:00 a.m. - 5:00 p.m. call: **(608) 263-6190**.

After 5:00 pm or on weekends, the clinic number is answered by the paging operator. Ask for the ENT doctor on-call. Leave your name, area code and phone number. The doctor will call you back.

If you live out of the area, please call: **1-800-323-8942**.

Web Links

<http://www.webwhispers.org>

<http://www.TheIAL.com>

<http://www.entnet.org/HealthInformation/Laryngectomee.cfm>

<http://www.entnet.org/content/ebooks>

You can get it for free download at

<http://dribrook.blogspot.com/>

You can get them as a paperback and Kindle at Amazon.com

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©6/2019. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7741.