

Tracheoesophageal Puncture for Voice Prosthesis

Following the initial stage of a total laryngectomy, patients routinely need three to six months for optimal wound healing before undergoing the second stage, tracheoesophageal puncture. Tracheoesophageal puncture, which takes about an hour, is performed with the patient under general anesthesia. When you awaken following the procedure, you will notice a temporary prosthesis that is sewn in place. The purpose of this temporary prosthesis is to create the opening for the subsequent functioning voice prosthesis. This initial prosthesis, which will not function for voice production, will remain in place for approximately one week. The patient stays one overnight in the hospital to be observed for airway, bleeding, infection, swallowing and other routine postoperative precautions.

Following the week of healing, you will be dilated in the office and measured for a final prosthesis. At that time you will also be referred to a speech therapist that will teach you how to use the prosthesis for voice production and answer many of your questions.

Although this second stage procedure is much less involved than the laryngectomy, the same pre-operative and post-operative considerations exist. As with any surgical procedure, certain risks must be discussed before obtaining surgical consent.

Anesthesia

Complications from anesthesia are known to exist. These complications (anything from nausea to stroke or death) are quite uncommon since patients are usually young and healthy.

Aspiration

Risk of aspiration exists because of the proximity of the surgery to your trachea. Every precaution is made to prevent leakage of saliva into your trachea.

Bleeding

Some bleeding is expected with any surgery, however, abnormal post-operative bleeding occurs in about 1%. If it does occur, bleeding usually occurs within the immediate post-operative period but may occur at any time during the first two weeks post-operatively.

Infection

Infection is rare due to the excellent vascularity to the tissues. However, infection involving the mediastinum, which would manifest as fever and sternal chest pain, could require IV antibiotic therapy. A prescription for preventative antibiotics is provided for use in the post-operative period.

Failure of Prosthesis

Although success and compliance with TEP is extremely high (over 80%), failure of the prosthesis due to postoperative scarring and radiation effects is a possibility.

Immediately following your surgery, the sedative medication and/or general anesthesia may make you drowsy for 24 hours. Therefore, do not:

- a) Drive or operate machinery for 24 hours
- b) Make major decisions, sign contracts, etc. for 24 hours
- c) Drink alcoholic beverages for 24 hours or at any time when taking prescription medication without your doctor's consent.

PRE-OPERATIVE INSTRUCTIONS

1. Nothing to eat or drink after midnight the evening prior to your surgery. This includes all foods, liquids, water, candy, mints or gum. You may brush your teeth the morning of surgery. Your procedure will be cancelled if you do not follow these instructions.
2. Notify us of all routine medications and significant health history. Take medications as directed with just a sip of water.
3. Please avoid aspirin, ibuprofen or any products containing these medications for one week prior to your surgery. If you are on any medications that affect bleeding, please notify the nurse at this time.
4. Do not bring valuables (cash, credit cards, jewelry) to the Surgery Center.
5. Remove all make-up and nail polish prior to arriving at the Center.
6. Please contact the Surgery Center at (585) 341-6707 after 2:00 pm on the business day prior to your surgery to confirm your arrival time.

POST-OPERATIVE INSTRUCTIONS

Written post-operative instructions will be provided at the time of hospital discharge.

Wound Care

Keep laryngeal stoma site clear of crusts and apply Polysporin-type ointment twice daily.

Diet

When the procedure is completed and the effects of the anesthesia have worn off, you will be started on clear liquids, advancing to a full diet as tolerated. Take care to avoid extremely hot beverages or food for 24 hours following the procedure.

Medications

Prescriptions, which will be given to you at the time of discharge, may include preventative antibiotics and pain medication. Patients who have undergone this procedure have stated that any discomfort is well managed by the prescription pain medications provided.

Activity

Please avoid any heavy lifting, bending or straining for two weeks following surgery. You may brush your teeth with care.

- After your hospital discharge, please notify the office of any of the following:
- Fever over 102 degrees F
- Difficulty breathing or painful swallowing
- Swelling that increases rather than decreases with time
- Difficulty with persistent hearing loss or dizziness
- Pain not managed by pain medication

As always, if you have any questions, please do not hesitate to call on us at (585) 256-3550 and ask for our nurse. We are all here to assist you in any way we can.