

Adjusting to your Laryngectomy after surgery.

Information to help you on discharge from hospital to manage your stoma independently.



Cleaning your stoma

You will have been shown on the ward how to clean your stoma, this must be done to keep your breathing passages clear and free from any crusts.

At the beginning it should be done at least every 4 hours but can be done more often as your body begins to change your breathing tubes to receiving air from a different way (directly through your stoma at the root of your neck). As time passes the body accepts the air is coming from a different route and changes – this in turn will reduce the mucus production.

Below is a simple guide on how to clean you stoma:

- Make sure you have all your equipment close to hand, you can either stand in front of a mirror or get a free standing mirror, a pen torch, gauze/tissue and some cooled boiled water or saline solution.
- Wash your hands.
- Remove the tube and clean around the stoma gently. Take a torch and shine it down the stoma and look for any crusts, if you can see any gently remove them. If they are dried it may be best to use the atomiser (spray bottle) to soften them or use a nebuliser, if you have been given one on discharge from hospital. Once softened they will be easier to remove.
- If the skin becomes sore or irritated barrier cream or wipes can be used, these are available on prescription.
- Once the stoma is clean reapply the tube with fresh tapes.
- If you use a baseplate and filter system – remove the baseplate every 24hrs or as recommended, clean around the stoma and use the adhesive remover wipes to remove any excess adhesive, allow to dry for a few seconds. Once dry apply the skin protector wipe and allow drying before reapplying your baseplate.
- Wash your hands and dispose of any tapes/filter in the bin.

Preventing mucus build-up inside your stoma

Keeping the mucus thin will make it easier for you to cough up. Remember to look into your stoma regularly to check for any crusts and you will also notice as you breathe in and out if anything is starting to build up in your stoma, either by the noise or by placing your hand in front of the stoma – you should feel the air coming out. It should have a good flow, if it is not then there may be something blocking it.

How to keep the mucus thin:

- Always wear a stoma protector or HME filter (heat moisture exchanger) – this acts as your nose/mouth and filter, heats and provides moisture to the air you breathe in.
- Making sure you are taking in plenty of water will also help keep the mucus thin and easier to cough up. Remember in hot weather to increase the amount as it is easy to become dry in the warmer weather.
- You may have been given a nebuliser on discharge – not all patients need one – if you have use it as needed. If your mucus becomes thick you can increase the times you use the nebuliser or if it becomes too thin you can reduce the times you use it.
- Use of the atomiser (spray bottle) is an easy way to keep the moisture in your stoma – you will have been given one on discharge – boil water and let it go cool then put it in the bottle. Try to remember to keep it with you at all times. You will need to remove the filter or bib and directly spray into your stoma for it to work best.
- Occasionally the mucus can become difficult to cough up – if you have been given a suction machine from the hospital you can use this to make it easier to remove the mucus – be careful with inserting the suction catheter – it can damage the wall of the breathing pipe. If you have not been given a suction machine you can contact your Nurse Specialist for advice.
- Deep breathing exercises will help to keep your chest clear - you will have mucus to cough up and clear away from your stoma – this will vary from person to person.
- Also the time of year can make a difference to your mucus – it will become thicker if you have a cold or it may be drier in the winter months as you put your heating on. Make sure you keep it moist as this will make it easier to cough up any mucus.
- Using a bowl with hot water may help break up any the mucus if it becomes thick. Lean over the bowl and breathe in slowly. Be careful not to scald yourself.

Important facts to remember about your stoma

If you follow the instruction the nurses have given you on discharge and care for your stoma regularly you should not have any problems.

Here are a few tips to consider about your stoma:

- Always wear a filter or stoma protector – this will heat and moisten your mucus and make it easier to cough up. It will also filter out any dust or pollen. There are different types of filters that can be used – speak with your Nurse Specialist or Speech Therapist who can advise you of which one to use.
- Be careful putting small bits of tissue into your stoma, they will cause damage to your stoma and may fall off down your stoma.
- Cotton wool or cotton buds will leave bits of fibres that may get inhaled into your stoma.
- Do not get water into your stoma, wear a shower protector for a bath or shower. If you wear a baseplate there are shower protectors that can be used also. These are available on prescription – ask you Nurse Specialist or Speech Therapist if you need one.
- Do not have the bath too full as if you slip the water will go directly into your stoma. Have someone close by to help if you have problems.
- Care needs to be taken with spraying any aerosols too near the stoma: they can irritate your stoma and cause you to cough.
- You will lose your sense of smell, although some patients can still experience their sense of smell through gulping are in – take care when cooking food and have a smoke alarm fitted to your house for safety.
- Protect the skin around your stoma in the sun, wear sun protector as the skin is sensitive and will be painful if it gets sunburned.
- If you go abroad, ensure you have all your equipment with you, if you need any documents to allow you to take these on board a plane, please contact the Nurse Specialist who will provide them.
- Wearing a filter will help abroad; it will help with preventing getting sand into your stoma
- If it is windy a filter will help stop the air going directly into your lungs, making it easier to breathe and keep the sand out of your lungs.
- Do not go swimming unless you have the correct swimming equipment – there are centres that will assess you and provide the correct tube and snorkel for you to be able to swim safely. Speak to you Nurse Specialist or Speech Therapist for advice.

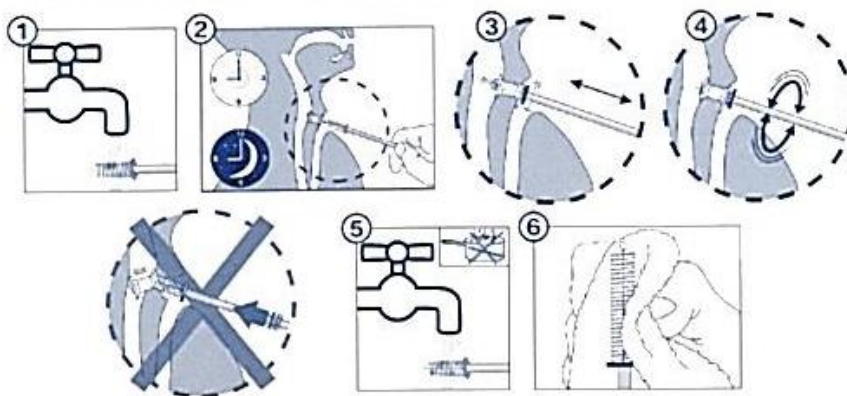
Cleaning your Speech Valve.

If you have had a speech valve placed the staff will have shown you how to clean it.

The valve should be checked and cleaned at least once a day as part of your daily routine. It may need to be more frequent if you have a cold or infection.

1. Clean your stoma as usual.
2. Using a valve cleaning brush:
Dampen the brush under the tap
Insert it straight into the valve gently
Gently twist the brush back and forth
Wash the brush under the tap
Repeat until no food/mucus is on the brush
3. Test your valve to ensure you can speak.

PICTORIAL CLEANING INSTRUCTIONS



If your valve starts to leak

The life of your valve will vary and may be weeks, months or years. Ensuring you clean your valve daily will help keep it working well.

To test your valve for leaking:

1. Clean your valve as usual
2. Stand in front of a mirror and with a torch take a drink of milk and watch for any fluid coming either through or around your valve
3. If you see a leak contact your Nurse Specialist or Speech Therapist to arrange to attend a clinic to get it changed
4. For a central leak you can use your plug when drinking till you can attend for a valve change.

Below is a link for a video which shows you stoma care:

<https://www.macmillan.org.uk/cancer-information-and-support/impacts-of-cancer/living-with-a-laryngectomy-stoma>

Below are the contact numbers for the Nurse Specialist and Speech Therapist:

Macmillan Clinical Nurse Specialists:

0151 529 5256 available Monday to Friday 8am till 4pm excluding bank holidays

headandneckcns@liverpoolft.nhs.uk

Speech Therapist:

0151 529 4986 available Monday to Friday 8am till 4pm excluding bank holidays