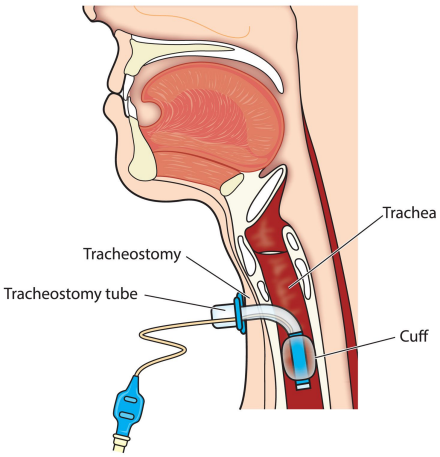
TRACHEOSTOMY



PATIENT RELATED INFORMATION

Tracheotomy is a procedure in which a tube (typically an inert plastic or silicone) is surgically inserted through an incision in the low part of the neck, into an opening created in the trachea (windpipe) below the level of the larynx (voice box).

There are many different reasons that patients may undergo tracheotomy.

1. Prolonged mechanical ventilation (respirator), replacing the endotracheal tube already present in the patient.
2. To bypass obstruction of the upper airway due to scar or tumour
3. Bilateral vocal cord paralysis.
4. Improving the ability to manage secretions in a patient who chronically aspirating (choking of their own saliva).

The relatives and patient in question person need to understand the implications of a tracheotomy.

1. The surgery is done in the hospital.
2. Sometimes the patient will remain hospitalised for a week or so after the procedure. Other times, depending on the reason that the tracheotomy was done, the patient might be transferred to a long term ventilator hospital / rehab / nursing home .
3. On other occasions, after a week in the hospital, in a patient that is able to care for the tracheostomy themselves, they might be able to be discharged to their home – after the appropriate education has been given, and the appropriate supplies have been arranged for in the home.

Just because someone has had a tracheotomy placed, doesn't mean it is necessarily a permanent tube.

DURATION OF THE TUBE:

The length of time that one needs to keep the tube is entirely dependent on the reason that it is being placed.

If the tube is placed for assistance with ventilator support, and if the patient's cardio- pulmonary status improves so that a ventilator is no longer necessary, then it may be possible to remove the tracheostomy tube.

The process of removal of a tracheostomy tube – called "**Decannulation" ,** may take anywhere from days to weeks to a few months.

In other instances, if the trach tube has been placed because of an irreversible neurological condition, it is likely that the trach will remain for the patients remaining lifetime.

Each individual circumstance is different.

There will be lifestyle changes once a tracheostomy is placed

1. water must be kept away from the tracheostomy tube.
2. Some patient may or may not be able to speak with a tracheostomy.
3. Eating may be possible with a tracheostomy tube, again depending on the circumstances that the tracheostomy tube is placed for.
4. Can have nearly normal daily activities.
5. Sometimes tracheostomy tube is in-situ along with Ryle tube in cases of suspected aspiration, allow intramural healing for sutures done for oral cancer or oral surgery, stroke patients.

The indications and risks of tracheostomy - surgery, as well as expected outcomes, must be understood prior to proceeding with your surgery.

1. *In some cases the tube is being placed for difficulty pin breathing after radiation , in which case the surgery will be difficult as post radiation the skin is not flexible , rigid with loss of anatomy.*
2. *The vessels may be more medial and may obscure the trachea,*
3. *There might be great vessels like carotid and innominate artery which might be high arched overlying the trachea, in some cases where the surgery is difficult.*
4. *There might be intra-op blood loss and post bleeding in case the vessels may get injured during the surgery especially in case of emergency tracheostomy.*

EMERGENCY TRACHEOSTOMY :

1. ***Done in settings where the patient has very difficulty in breathing with an obstruction in the airway***
2. ***Done in cases where there is a aspiration of a foreign body which cannot be retrieved and placement of the Endotracheal tube is not possible***
3. ***When ET tube cannot be placed due to multiple reasons.***
4. ***When patient has nil mouth opening or reduced mouth opening***

SURGICAL RISKS/COMPLICATIONS:

1) **BLEEDING**
2) **WOUND INFECTION**
3) **PNEUMOTHORAX (COLLAPSED LUNG)**
4) **SURGICAL EMPHYSEMA**
5) **AIRWAY SCARRING**
6) **TRACH TUBE DISLODGEMENT**
7) **FALSE PASSAGE ENTRY.**