



Information for laryngectomy patients having radiotherapy

You will have been given the booklet 'Information for patients having radiotherapy to the head and neck'. Many of the side effects you will experience during your radiotherapy are described in that booklet. However, there are some important side effects that apply only to people who have had a laryngectomy. These side effects are usually due to the radiotherapy and will normally settle down in the weeks after the treatment.

Humidification

It is extremely important that the air you breathe in is kept well humidified at all times, but especially during your radiotherapy treatment. This helps to prevent chest infections and also to reduce the chances of mucous plugs blocking your airway.

You may find that the mucous or phlegm coming up from your stoma is more sticky and hard to cough up. The dryness tends to be worse if you are an inpatient during your radiotherapy, because of the warm atmosphere in hospital. If the mucous becomes discoloured (green, yellow or brown) please let your doctor or nurse know. Some people also find that there is some blood in the phlegm or around the stoma. This may be due to infection. It can usually be cleared up with a short course of antibiotics.

To keep your airways moist, you should wear your Protector/ Laryngofoam or other humidification device at all times (*but see below about HME/Stoma filter devices*). It may also be necessary for you to use a saline nebuliser frequently during your treatment. If you are an inpatient, we may recommend that you use a mask, similar to an oxygen mask, to give you moistened air. This will prevent the secretions from drying up too much.

Stoma size

Sometimes, during radiotherapy, the laryngectomy stoma may shrink a little so we will need to watch it closely. We recommend that you wear a stoma stud or button or a laryngectomy tube during your treatment course, for at least part of the day or night. If you wish, this can usually be removed once the radiotherapy side effects have settled. If you have any concerns about your stoma, ask to see the nurse specialist.

It is very important during your treatment that you keep your stoma and any tube or stud that you wear very clean and free of crusts.

HME/Stomafilters devices

You may be wearing a heat and moisture exchange (HME) device. Many of these attach to your skin via an adhesive baseplate. Because the skin around the stoma can get very red and sore during radiotherapy, we strongly advise you not to use any adhesives during the treatment and in the weeks afterwards while the skin is healing.

Other ways of humidifying the air you breathe are available - please ask the specialist nurse, speech therapist or ENT surgeon, at the hospital where your surgery was performed, **before you start your radiotherapy**.

Voice/Speech

If you have developed voice with a speech valve, or if you use oesophageal speech, you may find that it becomes more difficult to produce your voice. It may even be lost altogether. Don't worry – this is quite common and you should get your voice back in the weeks after radiotherapy. It can be due to the radiotherapy causing some swelling of the tissues behind the valve or to thick secretions blocking the valve more than usual.

Continue to use your voice but treat it gently if speaking starts to become more difficult. Avoid straining to speak. You may need to rely on mouthing or writing to communicate during this period - bring pen and paper into hospital with you. Valve users will probably need to clean their valves more frequently during radiotherapy, possibly 3 to 5 times a day. If you have any concerns ask to see the speech therapist or clinical nurse specialist.

Eating & drinking

As you will have read in the booklet, your throat may get very sore during the treatment. You may have some trouble eating and drinking and will probably have to change to a soft or liquid diet. Occasionally patients need to be fed by a tube. It is very important to take strong enough painkillers to help you eat and drink so please tell the doctor, nurses or radiographers if you are having problems.

Constipation

Because of the painkillers and also the change in diet, you are very likely to become constipated. This can be a difficult problem and you should let the doctors or nurses know if there is any change in your bowel habit. Anyone taking strong painkillers (codeine or morphine-based) should normally take a laxative as well.

What you need to bring into hospital with you

If you are staying in hospital for your treatment and you wear the small squares of Laryngofoam or the Buchanan protectors for humidification, please bring an adequate supply in with you – The Christie cannot supply large amounts of these items.

You will also need to bring in any tubes or stoma buttons that you wear and the equipment (brushes or pipets) you use to clean your speech valve. You may need to use pen and paper for communication towards the end of your treatment so bring a supply in with you. Bring your artificial larynx and battery charger if this is your main means of communication.

Worries about the future

We know that this can be a stressful time as you have had a major operation and now have to go through more treatment. If you feel you need to talk about this to someone, please ask to speak to your team of doctors or the specialist nurses at The Christie. Telephone numbers are listed below.

Contact details

If you have any problems or questions about your treatment or the side effects, please contact one of the people below – we are all here to help you.

- Kathleen Mais, Head & Neck Nurse Clinician
0161 446 3428 or 0161 446 3000, bleep 12589
07594 438 631 (Text)

Kathleen is a specialist nurse who is experienced in caring for people having radiotherapy for head and neck cancer. She is available at any stage of your treatment for help or advice - just ask the ward nurses, doctor or radiographers to get in touch with her. You can also contact her after your treatment if you have any worries about the side effects or about your general condition.

- Claire McVey, Macmillan head and neck clinical nurse specialist
0161 918 2424 or 0161 446 3000, bleep 12828

Claire is a clinical nurse specialist who is experienced in assessing and identifying patients' needs. She will provide information and support to patients and their families through their treatment and ensure effective communication between healthcare professionals.

- Debbie Elliott, Head & Neck Specialist Nurse
0161 446 8041 or 0161 446 3000, bleep 12610
07919 488 152 (Text)

Debbie is a specialist nurse who is experienced in caring for people who have had surgery and are going through radiotherapy for head and neck cancer. You can contact her for advice about your stoma - just ask the nurses or radiographers looking after you to get in touch with her for you.

- **Speech & Language Therapists 0161 446 8046**

The speech therapists specialise in head and neck cancer treatments. If you have any concerns about your ability to communicate or swallow during your treatment, or any difficulties with your speech valve or speech aid, please contact us. We are located in the rehabilitation unit telephone **0161 446 3795**. Your routine speech therapy will be carried out by the therapist at the hospital where you had your surgery or your community speech and language therapist.

- **Out of hours**

If you have urgent problems with your stoma at home over the weekend, or in the evening, get in touch with the team of doctors at the hospital where your operation was performed. You can contact the Christie on-call radiotherapy doctor by calling the hospital switchboard on **0161 446 3000**.

Further information

Macmillan Cancer Support

For free and confidential helpline from nurse specialists and living with cancer and general information ☎ **0808 808 0000**
www.macmillan.org.uk

NALC

National Association of Laryngectomy Clubs
Ground Floor, 6 Rickett Street,
London SW6 1RU

☎ **0207 381 9993**

www.nalc.uk.com

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact **patient.information@christie.nhs.uk**

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For more information about The Christie and our services, please visit **www.christie.nhs.uk** or visit the cancer information centres at Withington, Oldham or Salford.

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