

What to do when your laryngectomy valve leaks

Information and advice for patients

Speech and Language Therapy

How will I know if my laryngectomy valve is leaking?

You will notice that you will cough when drinking. This may be occasional but will get worse if your valve is leaking. If this happens try cleaning the valve with the brush you have been given to see if this stops the leaking.

If it continues to leak and is making you cough, look in the mirror while you drink milk or a coloured drink (or ask someone to look at the valve while you do this) so that you can see if it is coming through the middle of the valve or around the outside.

What should I do when my valve is leaking?

When you know that your valve is leaking, it is important that you watch to see if the leakage is coming through the middle of the valve or around the outside of the valve.

If the leakage is AROUND the valve: your valve should not be changed. Take drinks slowly and observe for a day or two. If it continues to leak around or gets worse and you cannot drink safely, telephone for an appointment to see one of the medical team. It may only be a temporary problem, particularly after a new valve has been fitted.

If the leakage is THROUGH the valve: If you have had your valve longer than 3 – 4 months it is likely it is worn and needs replacing. This is not an emergency but needs to be done as soon as possible (within the next 48 hours) so that you can drink safely.

Contact the hospital as soon as you notice the problem so that you can be given an appointment for the valve to be changed the next day (if possible). Valve changes can only be done at City Hospital and not at Sandwell Hospital.

Who do I contact?

DO NOT come to the hospital without phoning first.

- **Monday – Friday, 8.30am – 4.30pm** you should contact the ENT clinic reception (before 10am if possible) and tell the receptionist you need an appointment to have your valve changed.
- **If you already have an appointment in the ENT clinic** please call first to let us know that you need your valve changing.

Please bring your valve change card with you to every appointment. The ENT clinic will have a record of the type and size of your valve and when it was last fitted. If you have a Blom Singer valve there will be individual equipment with your name on in the ENT department which should be used to change your valve each time.

Your valve will be changed in clinic. This will take about 10-15 minutes.

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A few people need to have their valve changed under general anaesthetic (where you are asleep) and the procedure will differ to that described above. If you usually have your valve changed with a general anaesthetic, please tell the receptionist when you call.

How long should my valve last?

Valve survival times can vary greatly. Some last only a short time e.g. one or two months, whereas other last years. You will get to know how long they usually last for you. You may need your valve changing if it has been in for more than 6 months, even if it is not leaking; your speech and language therapist can advise you about this.

Remember your valve is silicone and will wear out in time with normal use such as eating and talking.

How can I prevent my valve from leaking?

Always clean your valve thoroughly but gently with the brush provided, in case a food particle has lodged in it as leakage can occur when food gets stuck around the back flap of the valve. However, do not over-clean the valve; 2 – 3 times a day (after meals) is the maximum you should be cleaning.

If food does become stuck and you are unable to use the brush you can also try and give a hard cough to try and clear it.

Contact details for arranging to have your valve changed

ENT clinic reception

0121 507 4556

Monday – Friday, 8.30am – 4.30pm

Further information

For more information about our hospitals and services please see our website:

Sandwell and West Birmingham Hospitals NHS Trust

www.swbh.nhs.uk

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Sources used for the information in this leaflet

Royal College of Speech and Language Therapists, 'Prosthetic Surgical Voice Restoration (SVR): The role of the speech and language therapist', 2010

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5495 or email: swb-tr.swbh-gm-patient-information@nhs.net



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