Pract. oto-rhino-laryng. 1959;21:188

Feeding Problems in Patients with a Pharyngostoma 16 mm. colour-film

P.H.		Damsté
------	--	--------

From the Ear, Nose and Throat Clinic of the University [Director: Prof. E. Huizinga]
Groningen

Author's address : Dr. P. H. Damsté, Academisch Ziekenhuis, Afd. Keel-Neus- en Oorheel-kunde Groningen (Netherlands)

In the treatment of laryngeal carcinoma x-rays have found a place next to surgery. Previous x-ray treatment may have unpleasant consequences for the surgeon because of its unfavourable effect on wound-healing after total laryngectomy, which can lead to a pharyngostoma.

The patient is then in a poor condition. The speech rehabilitation to which he had been looking forward, is cancelled and for feeding he remains dependent on the stomach tube.

One of our patients found a very unusual solution for this problem. Before meals he ties a collar around his neck. This collar consists of the following parts: a small lead weight and a spoon without a handle, wrapped up together in a bicycle tube. This was noticed by Dr. B. K. S. Dijkstra, who had the patient filmed.

We added shots of two other patients. One has assembled similar equipment for himself: in order to be able to drink he closes his pharyngostoma with a cork, a tea-spoon and a piece of foam-plastic made into a pack. After their example we fitted a third patient with an acrylic prosthesis, molded on the pharyngostoma.

A simple device like this makes the use of a feeding tube unnecessary. It is therefore very valuable to the patient, because it enables him to enjoy his food again.

In general these cases are uninviting for plastic surgery. However even if it is decided to attempt plastic reconstruction of the anterior pharyngeal wall at a later date

it may be useful to provide the patient temporarily with an appliance like the one described.