

Lary Tube Care

(Laryngectomy Tube)

What is a Lary Tube?

A lary tube is a flexible silicone tube designed to maintain the stoma right after the laryngectomy surgery. A lary tube is used to maintain the airway and can be following a laryngectomy.



Definitions

To take care of your lary tube, there are several words you should know.

- Trachea – the windpipe
- Stoma – the new airway created after your laryngectomy – It is an opening in the neck used for breathing.
- Mucus – the liquid secretions that are made by your lungs

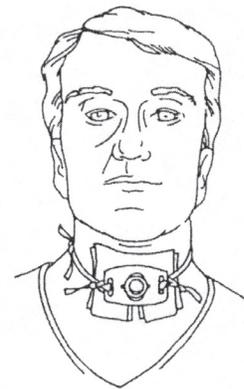
Hand washing

Good hand washing habits are very important. This helps prevent infection. With a lary tube, you are at higher risk for infection. You **MUST** wash your hands before and after you do any part of your lary tube care. If someone else is helping with your care, they **MUST** wash their hands before and after too. Wash your hands with warm water and soap for at least twenty seconds. Dry your hands with a clean, dry paper towel. Then, use the paper towel to turn off the faucet.

Cleaning the Stoma

You should clean your stoma before changing the straps to avoid getting it wet.

1. If you have crusted areas outside the stoma, use a water soluble lubricant such as K-Y jelly around the stoma to moisten the crusting. Never pick at or remove dried crusting without moistening it with a lubricant. **Do NOT use Vaseline.**
2. For crusted areas inside the stoma, purchase a new spray bottle and fill with saline (*see box below right*). Spray 2 squirts into stoma to moisten. Cough and expel the dried, crusted plugs. You can also use a syringe filled with 5 ml of saline to squirt into the stoma to moisten crusts.
3. If you have frequent problems with dried crust, you can put small amount of lubricant around your stoma. Do not allow the lubricant to go into the stoma.
4. Always wash your hands before and after doing stoma and lary tube care.
5. Wash your hands.



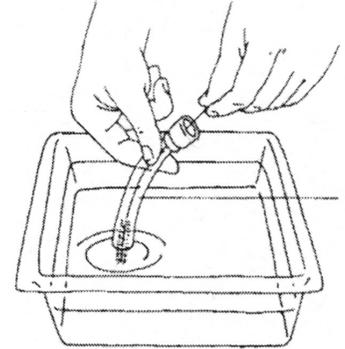
To Make Homemade Saline Solution:

- Dissolve 1 tsp. of salt in a quart of water.
- Shake well.
- Store solution in a new, clean container. Make sure to label and date the container. Discard after 24 hours.

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How to Clean the Lary Tube

To prevent infection, remove and clean the lary tube regularly, as your doctor ordered. This is usually done 2 or 3 times each day. You may need to clean it more often if you have thick or sticky mucus. **Do NOT use hydrogen peroxide, rubbing alcohol, or any chemicals to clean your tube.**



1. Wash your hands.
2. Gather these supplies near a sink:
 - Small brush or lary tube brush
 - Gauze pads or soft cloth
 - Water and mild soap
 - Clean or replace neck strap if the old one is dirty. You can use the Velcro straps, bias tape, or any other clean, comfortable, soft material.
3. Remove the straps from the lary tube.
4. Remove the lary tube by pulling steadily up and outward. If you start to cough, cover the stoma with a tissue.
5. Scrub your tube with a clean, soft sponge (or soft bristle brush) under running water. If your tube is heavily soiled, you may use hot water and a mild soap. **(Do NOT use an oil-based soap.)** Rinse tube thoroughly with distilled water.
6. You can also place your tube in rapid boiling water for 5 minutes (but no longer than 10 minutes). Let tube cool thoroughly.
7. Shake off excess water; replace your tube and secure with straps.
8. You might need to put some K-Y Jelly on the end for easier placement into stoma. **Do NOT use Vaseline.**



IMPORTANT: Do NOT clean your tube with peroxide, rubbing alcohol or any other chemicals.

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Changing the Strap

The strap needs to be changed when it becomes dirty. Remove the tube to replace the straps. *You may need someone to help you.*

1. Gather the following supplies:
 - New strap
 - Scissors
2. Cut or remove velcro and remove the old strap while your caregiver holds the lary tube in place or remove the lary tube and replace the strap.
3. Thread the strap through the lary tube openings and fasten it. You should be able to place 2 fingers behind the strap. **Do NOT over-tighten.**
4. To wash the strap, you can use hand or dish soap and water. Be sure to allow the strap to air dry before using again.



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Suctioning Your Trachea

For a while, you will probably need a suction machine to help clear the sputum from your airway. Before suctioning, check your lary tube to be sure it isn't blocked with mucus. If it is blocked, follow the steps above for cleaning the tube. If you still have trouble coughing up your mucus, you will need to suction. It is best to remove the lary tube if there are secretions/mucus. You may suction your trachea without the lary tube in place.

1. Gather these supplies:

- Suction machine
- Connection tubing
- Clean bowl
- Water (Clean tap water can be used. For those with well water, bottled water should be used.)
- Suction catheter
- Bulb syringe

2. Wash your hands well and fill the bowl with water and set it aside.

3. Turn on the suction machine, and adjust the regulator dial to the right setting. The setting should be between -80 and -120 mm Hg, but no higher than -120 mm Hg.

4. Remove the suction catheter from its wrapper or airtight container. Attach the suction catheter to the control valve on the suction tubing.

5. Dip the loose tip of the catheter into the water. This will help the catheter glide more easily. Put your thumb on the port and suck up some of the water to make sure the suction is working. Then release your thumb from the port and empty the water.

6. Put a saline solution mist or up to 3 cc of saline in your stoma. This will loosen secretions.

7. Take a few deep breaths and gently insert the moist catheter between 5 and 8 inches into the trachea through your lary tube or stoma until you feel resistance.

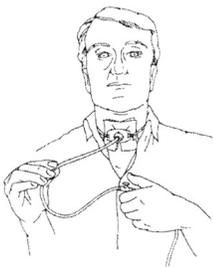
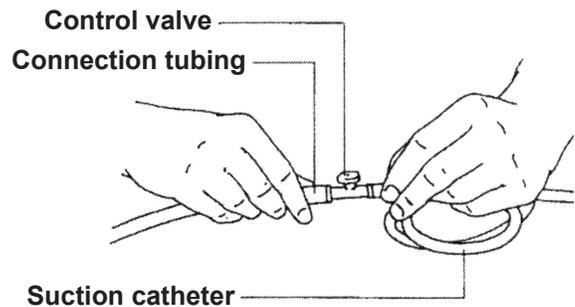
Caution: Take care not to injure yourself. Be careful not to cover the catheter's suction port during insertion. The suction pressure that results can damage the tissues that line your trachea.

8. With your thumb, cover and uncover the catheter's suction port to start and stop the suction. As you do this, slowly take the catheter out of the trachea, rolling it between your thumb and finger as you go. This should take no more than 10 seconds. (Longer than that steals oxygen from your lungs.)

9. Repeat if needed for a lot of secretions.

10. You may see a small amount of blood. This is normal and not a cause for concern.

11. Put the catheter tip in the water to clean the suction catheter and the connection tube. Then turn off the suction machine and disconnect tubing. Throw the disposable catheter away in a plastic-lined wastebasket. If you're using a reusable catheter, sterilize it according to the manufacturer's instructions.



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Cleaning the Suction Machine

1. Empty the mucus from the suction bottle into the toilet.
2. Wash the suction bottle with hot soapy water.

Common Questions

1. What changes do I need to make to my lifestyle?

It is best to maintain as normal a lifestyle as possible. Your doctor will tell you when you can return to your normal activities.

2. How do I keep my stoma humidified?

Usually, the air you breathe is moistened and warmed by your mouth and nose. After your laryngectomy, the air must be moistened in other ways.

- Drink plenty of fluids (water).
- You will also need to use a cool mist humidifier (check with your doctor).
- Keep the humidifier going throughout the day and sleep with it by your bedside. (Have one in the bedroom and one near a chair.)
- Be sure to clean the humidifier according to the manufacturer's directions. **Do NOT use bleach to clean the humidifier.**
- Wear your Heat and Moisture Exchange (HME) cap for 24 hours, then discard and replace with a new one. If you wear an HME, you don't need a humidifier.

HME Cap



3. Where do I get my supplies to care for my lary tube?

Supplies needed to care for your stoma tube should have been arranged before you leave the hospital. Your social worker, speech-language pathologist, and nurse will help you with this.

4. How can I prevent any problems?

It is important that you prevent problems when possible.

- You should avoid contact with people who are ill.
- Wash your hands regularly, eat a healthy diet and get plenty of rest.
- Avoid dust, smoke, powders (even face powder), hair spray, etc.
- Wear clothing that will not block the stoma opening.
- If you go outside into cold weather, you should keep your stoma covered by wearing a stoma cover or an HME. This will help warm the air you breathe and prevent cold air from irritating your windpipe.
- Cover the area with a shower guard/collar when taking a shower. Do not let the water hit the area directly.
- Do NOT go swimming with your lary tube and avoid water sports and boating. Protect your stoma from the sun.

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4. How can I prevent any problems? (*continued*)

- Do NOT smoke and avoid being in a smoking environment.
- If possible, avoid sleeping under a ceiling fan and sleep with the head of your bed elevated 30 degrees.
- Consider wearing a medical ID bracelet so emergency personnel will know you breathe through a lary tube.
- Contact your local 911 and explain that you are a neck breather only. If a call comes from your home, they should dispatch someone immediately.

5. When do I need to call the doctor?

Call your doctor if:

- You are unable to remove the lary tube when you go home. DO NOT force it.
- You are unable to reinsert the lary tube after removing it to clean.
- You have pain while suctioning.
- IF YOU ARE HAVING PROBLEMS BREATHING, CALL 911 IMMEDIATELY.
- You develop signs of infection near the stoma. These signs include:
 - Swelling at the stoma site
 - Red, painful, or bleeding stoma
 - Foul-smelling or bloody mucus
 - Bright red blood in the mucus
 - Fever over 100 degrees
 - More than your usual amount of mucus

6. When can my lary tube be removed?

Talk to your doctor about when your lary tube will be removed. Removal of the tube does not require surgery, but it should be done by a skilled professional. Your speech-language pathologist will also address the use of a lary tube.

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