

SELF-PERCEPTION OF QUALITY OF LIFE AFTER TOTAL LARYNGECTOMY

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Introduction: Total laryngectomy is a surgical approach to excise the larynx, usually because of a tumor. Voice function will be affected and learning of alaryngeal speech is needed. Besides, aesthetic implications, respiratory, swallowing and other functions are likely to be compromised. Thus, quality of life is commonly decreased in the social, emotional and physical domains.

Aim: To describe the scores of two scales that assess the self-perception of communicative limitations associated to laryngectomy.

Methods: Laryngectomized patients (n=17) of a central hospital in Oporto, who attended Speech Therapy during 2016, were included. Each patient was assessed by two tools: “Self Evaluation of Communication Experiences after Laryngectomy”; “Communication Activity and Participation after Laryngectomy”. Other variables were also collected: alaryngeal speech; tumor staging; complementary treatments. Descriptive and inferential statistics were used.

Results: All subjects were male and were, in average, 60 years old (± 9.31). Most patients do whispered speech (35.3%). At that moment, 11 patients were retired and 2 were still working. The majority were classified based on oncological stage T3 and T4 (82.4%) and N2 (41.2%). Only one subject was classified as M1. 47.1% received combined complementary treatments after surgery. In general, all patients speak less after surgery and consider their speech problem as severe. However, this does not inhibit their participation in social activities, assuming a relaxed and comfortable communicative posture. Patients usually don't report negative emotional symptoms. The major factors that affect communication skills are environmental (eg, noise) and social (eg, groups).

Conclusion: With this study, we acknowledge the communicative handicaps felt by laryngectomized patients. Also reinforce the need of more information regarding this pathology to general and clinical populations. The results are not statistical significant because of the sample size, which should be solved in future researches. The used tools should also be adapted in terms of length and be more easy to fill.