Uchyłki przedniej ściany gardła po laryngektomii całkowitej
Anterior diverticulum after total laryngectomy

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SUMMARY
Pharyngeal anterior diverticulum, also known as pseudoepiglottis is one of the most common disorders after total laryngectomy.

The aim of this study: was to evaluate frequency of diverticulum after different types of total laryngectomy and severity of dysphagia in patient with developed pseudoepiglottis.

Material and methods: The material consisted of 80 patients after following surgeries: total laryngectomy with hyoid bone resection, total laryngectomy without hyoid bone resection, total laryngectomy with hyoid bone and base of tongue resection, total laryngectomy and partial pharyngectomy with hyoid bone resection and total laryngectomy and partial pharyngectomy with hyoid bone and base of tongue resection. To evaluate morphologic and functional disorders clinical examination, videopharyngoscopy and cineradiography of swallow act were performed.

Results: Pseudoepiglottis was present in 34 (43%) of patients, mainly after surgeries without hyoid bone resection. There was no correlation between diverticulum formation and pharyngeal closure (muscular or non-muscular), shape of closure (vertical or “T”), pharyngocutaneous fistula, radiotherapy.

Conclusions: This study indicates that leaving hyoid bone is a major risk factor for developing pseudoepiglottis.

Hasła indeksowe: zaburzenia połykania, uchyłek gardła, rak krtani
Key words: dysphagia, pharyngeal diverticulum, laryngeal cancer