

Information for Consent Total Laryngectomy 全喉切除術

Introduction 簡介

To resect the whole larynx and create a new permanent tracheotomy. This will result in a loss of the natural voice

全喉切除，氣管永久造口；會失去正常發聲功能

Indications 適用情況

Malignant tumor involving the larynx, hypopharynx

惡性喉，下咽腫瘤

Intended Benefits and Expected Outcome 預期結果

1. Complete removal of malignant tumor involving the larynx, hypopharynx
切除喉，下咽腫瘤
2. There is a chance of incomplete removal of disease and recurrence
有機會不能全部清除腫瘤和有可能復發

Conditions that Would Not be Benefited from the Procedure 手術不能解決的問題

Tumor extends beyond the confine of the larynx

腫瘤超出喉，下咽範圍

The Procedure 手術過程

The operation is done under general anaesthesia. An incision is made in the neck and the larynx is resected. The tracheal end is then connected to an opening at the front of the neck. A voice prosthesis may be inserted for speech rehabilitation.

手術會在全身麻醉下進行。醫生會在頸部切口，全喉切除。氣管的一端會連接頸前的一個造口，以便呼吸。醫生可能會置入人造聲瓣以幫助病人發聲。

Risk and Complication 手術風險或併發症

There are always certain risks and complications of a surgical procedure. Our medical staff will take every preventive measure to reduce the risk of complications.

手術有風險和可能有併發症，醫務人員將盡力減少發生併發症的機會和風險。

Common Risks and Complications 常見風險和併發症 ($\geq 1\%$ risk/風險)

1. Bleeding
出血
2. Infection
感染
3. Pharyngocutaneous fistula
咽瘻
4. Tracheostome stenosis causing breathing difficulty and requiring stenting or revision surgery
氣管造口狹窄，引致呼吸困難而需要氣管套管或手術修正
5. Loss of power to lift up heavy weight
失去舉重力

6. Pharyngeal stenosis causing dysphagia
咽狹窄，引致吞嚥困難
7. Thyroid insufficiency causing lethargy, cold intolerance, weight gain, hypotension, heart failure, arrhythmia, requiring life-long replacement medication
甲狀腺功能減退，引致疲倦、怕冷、體重增加、低血壓、心臟衰竭、心律不整等，需要用替代藥物治療
8. Parathyroid insufficiency causing muscle cramp requiring life-long replacement medication
甲狀旁腺功能減退，引致肌肉痙攣，需要用替代藥物治療

Uncommon Risks with Serious Consequences 不常見的風險或嚴重併發症 (<1% risk/風險)

1. Pneumothorax
氣胸
2. Skin necrosis
皮膚壞死
3. Nerve injury
神經損傷
 - a. Hypoglossal nerve (XII) injury causing impairment of tongue movement and swallowing and speech problem
舌下神經損傷，引致舌活動困難、語言和吞嚥問題
 - b. Phrenic nerve injury causing breathing difficulty
膈神經損傷，引致呼吸困難
 - c. Sympathetic nerve injury causing dropping of eyelid, dryness of face
交感神經損傷，引致眼皮下垂、面部乾燥
4. Death due to serious surgical and anaesthetic complications
由於手術或麻醉的嚴重併發症引致死亡

Before the Procedure 手術前準備

1. Inform your doctor of any medical condition and medications you are taking. Medications may need to be adjusted as appropriate.
請告訴醫生你的醫療及服藥情況。可能需要對藥物作恰當的增減。
2. The doctor may arrange speech therapy consultation before the operation
手術前醫生可能會安排你接受言語治療

After the Procedure 手術後須知

1. You will breathe through an opening in the neck which is connected to the trachea
你將透過連接氣管的頸部造口呼吸
2. You cannot eat by mouth for about two weeks. Nourishment will be provided by nasogastric tube feeding.
手術後大約兩個星期內你都不能經口進食，需用胃喉進食。
3. You will have neck wound dressing and drainage tubes. The drainage tubes are connected to drainage bottles and will be removed after a few days.
手術後頸部會有傷口敷料及引流管。引流管把液體導往引流瓶，手術後幾日便會拆除引流管。

4. Wound pain is common and will be controlled by medications

傷口疼痛乃屬正常，可服藥控制

5. After the wound is healed, the doctor will arrange vocal rehabilitation for you.

傷口癒合後，醫生會安排你接受發聲復康治療

Alternative Treatment 其它治療方法

1. Radiotherapy

放射治療

2. Chemotherapy

化療

3. Symptomatic palliative treatment

舒緩治療

Consequences of No Treatment 不治療的後果

Progression of tumor and death

腫瘤惡化及死亡

Follow Up 手術後跟進

See the doctor as scheduled

請依期覆診

Remarks 備註

This is general information only and the list of complications is not exhaustive. Other unforeseeable complications may occasionally occur. Actual risk may be different in specific patient groups. For further information please contact your doctor for details.

本單張只提供有關手術的基本資料，可能發生的風險或併發症不能盡錄。某類病人的風險程度亦會不同。如有查詢，請聯絡你的醫生。