



JUNE 2020

VOICE SURGERY PROGRAM

INFORMATION BOOKLET

PART C

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INTRODUCTION PART C

This part contains information and advice about your postoperative care. It explains what is normal after a surgery, pain relief, how to treat your wounds, and how to recognize a complication. These recommendations will help you recover more quickly and will ease your convalescence. Please bring this document with you on the day of your surgery.



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CONVALESCENCE

12.1 WHAT IS NORMAL AFTER A PROCEDURE?

SWELLING (EDEMA)	<p>Swelling continues for the first 48 hours following your surgery and will diminish after a few weeks. It is important to apply ice during these 48 hours to help reduce swelling and relieve pain.</p> <p>Swelling following surgery may take up to one year to completely disappear. Severe edema is abnormal and may be a sign of infection, hematoma/seroma, or bleeding.</p>
ECCHYMOSIS (BRUISING)	<p>Bruising may occur within two to three days following your surgery and disappear in the following weeks. Bruising is a side effect common to any surgical procedure.</p> <p>Diffuse and severe bruising is abnormal. This may indicate a complication such as hemorrhage that must be managed by a physician.</p>
SCARS	<p>From three to six weeks following an external procedure, your scars will become thicker and darker red. This is when they will be the least attractive. You will have to wait 6 to 18 months before your scars flatten, soften, and begin to fade.</p>
BLACKISH OR BLUISH SCABS	<p>Scabs may form on scars. These scabs will dry and fall away on their own. It is important not to rub or scratch at them.</p>
ITCHING	<p>Itching is a sign that your wounds are healing. Ice, fragrance-free moisturizers, and massages can help relieve itching.</p>
NUMBNESS OR HYPERSENSITIVITY	<p>It is normal to feel numbness or hypersensitivity to the wound during the first 12 to 18 months. Sensitivity gradually returns as the nerve endings heal. This can take up to a little over a year to happen.</p>
RESPIRATORY CHANGE	<p>It is normal to feel a change in breathing. The new tension in the vocal cords and their manipulation during the endoscopic procedure necessarily causes a reduction in the opening of the trachea.</p> <p>However, you must go to the nearest emergency room if you spit up blood, develop noisy breathing or experience severe breathing difficulty.</p>

12.2 PAIN MANAGEMENT

It is important to understand that the higher your pain is, the more difficult it will be to relieve. Here are some instructions to help you better control your pain.

Pain is often more intense during the first 48 to 72 hours following the surgery. It is often caused by edema in the throat region. To reduce pain, swelling must be reduced. To do so, it is essential to suck on ice and apply ice on the wound as often as possible during the first 48 hours.

Additionally, be sure to take acetaminophen combined to an anti-inflammatory (Advil®, Motrin®, Ibuprofen®) regularly (as prescribed by your surgeon) during the first 48 hours following your surgery.

Consult your doctor if the pain does not decrease. To avoid complications, we do not prescribe narcotics for voice surgery.

After 48 hours, you may continue taking your analgesic or acetaminophen (Tylenol®) as needed if the pain becomes bothersome.

Always follow your medical prescription and refer to your pharmacist or attending physician if necessary, to ensure a safe use.

12.3 RESUMING YOUR REGULAR MEDICATION

After your surgical procedure, you can resume your regular medications as prescribed by your surgeon.

It is important to continue taking your anti-reflux medication and, if necessary, your allergy medications and asthma pumps for one year after surgery.

12.4 VOICE USE

Following your surgery, you will be required to remain silent for a period of **10 days**. This period of silence is essential to allow healing to take place.

Keeping silent means: do not whisper, do not moan, do not murmur, do not clear your throat, do not cough, do not sneeze loudly (do it silently) and do not spit. The purpose is to give your vocal cords a complete rest.

For **one year** after surgery, we recommend that you avoid shouting, sneezing loudly, coughing, spitting, or clearing your throat.

After the 10-day period of silence, we allow you to use your voice for a maximum of five minutes per hour in the first week and 10 minutes per hour in the second week. It is normal that you may encounter difficulty using your voice at first. Therefore we recommend that you consult your speech therapist as soon as possible after the 10 days of silence.

12.5 SPEECH THERAPY

To begin your rehabilitation as soon as possible, we recommend that you schedule an appointment with your speech therapist 14 days after surgery. It is important that you continue your treatments and that you are assiduous in doing the exercises that will be prescribed to you. Remember that more than 50% of your results depend on it!

12.6 STITCHES

For external procedures, your surgical wound will be closed with “dissolving stitches” and may take 30 to 90 days to completely dissolve. There is no need to worry about their removal.

We recommend NOT using a dressing but keeping the wound in the open air.

Along the incisions are adhesive strips. They will probably fall off by themselves in the shower. If not, you can remove them three weeks after your surgery.

It is important to never pull at your stitches.

12.7 HYGIENE

- Take a shower daily;
- Use a mild, fragrance-free, alcohol-free soap (Dove or Ivory), avoid disinfectants, peroxides or other chemicals;
- Rinse off excess soap well. Make sure that the shower jet is not in direct contact with the wound, just let clear water run over your wound; and
- Dry the wound thoroughly with a clean towel by patting (never rub the wound area), then let it air dry for about 15 minutes.

12.8 SWIMMING AND SUN EXPOSURE

Wait six weeks for your wounds to be completely healed before swimming in a pool, hot tub, or lake. Avoid exposing your wounds to the sun for the first year following your surgery.

12.9 HEALING OF YOUR WOUNDS AND SCAR MASSAGE

Approximately six weeks after your procedure (unless your wounds are not completely closed), you can begin scar massage to stimulate blood circulation and increase the elasticity and flexibility of the tissues surrounding the surgery area. Scar massage also allows improvement to the appearance of your scar and eliminates the sensation of having “small bumps” under the scar.

Perform the massage in the direction of the incision with a Vitamin E cream or silicone gel. This type of cream is available in pharmacy. You can also use Mepitac® silicone strips. Oils are not recommended because they leave a greasy substance on the wound and can cause pain.

12.10 MOBILITY

Rest and resume your daily activities as soon as possible and according to your tolerance levels.

- Until the 4th week, avoid lifting objects weighing more than 4.5 kg (10 lbs.). Plan to have help for your return home (cleaning, groceries, laundry, etc.).
- Wait until the 6th week after your surgical procedure to participate in intense physical activities.

12.11 HYDRATATION AND BOWEL MOVEMENTS

General anesthesia can cause constipation. Here are a few suggestions:

- drink at least 2 to 3 litres of water per day;
- increase your daily consumption of fiber (fresh or dried prunes, or prune juice, All-Bran Buds-type cereals, fruits and vegetables, etc.);
- reduce your consumption of caffeinated beverages like coffee, tea, and soft drinks and avoid alcohol — these drinks contribute to dehydration; and
- establish a physical activity routine.

If the problem persists, consult your pharmacist.

12.12 ALCOHOL AND TOBACCO

Stop drinking alcohol four weeks before and three months after surgery. Mixing alcohol and medication can cause unpredictable adverse reactions. Alcohol also increases the risk of complications by causing inflammation directly on the vocal cords. Any use of alcohol may compromise the quality of your results.

Your surgeon will recommend that you stop smoking cigarettes and/or any form of smoke or vapor irritant at least six months before surgery and avoid starting again afterwards. Nicotine and the toxic substances contained in tobacco can contract small blood vessels and therefore:

- increase the inflammation on your vocal cords and completely offset your surgical results;
- slow down the healing of your wound and thus increase the risk of infection;
- increase the risk of breathing problems and pneumonia after the operation; and
- cause nausea, vomiting and coughing in the morning, which increases the risk of bleeding after surgery.

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RISKS AND COMPLICATIONS

13.1 INFECTION OF THE WOUND

Beginning as soon as you return home, check your incisions daily to make sure there is no infection. Continue to do so until your wounds are completely healed.

INFECTION SIGNS:

- Redness
- Sensation of heat
- Sensitivity
- Swelling
- Discharge of pus with a foul odour
- Increased pain in area of the surgery
- Shivering and a fever exceeding 38.5°C or 101°F for more than 24 hours

13.2 HEMATOMA AND SEROMA

A hematoma is an accumulation of blood beneath the skin and a seroma is related to an accumulation of clear bodily fluid. It may represent a mild accumulation, but a hematoma may also result from a more serious accumulation.

Hematoma and seroma occur most often in patients who took Aspirin one week before their surgery, who lifted excess weight, or who made a physical effort too soon after their surgery.

Symptoms of hematoma and seroma are:

- localized increase in pain;
- an area that becomes suddenly harder to the touch; and
- increased swelling.

If you suspect a hematoma or seroma, please let us know by contacting us by email at: asclepiade@cmcmontreal.com.

13.3 REOPENING (DEHISCENCE) OF WOUNDS

The healing process is influenced by a series of factors: inflammation, infection, strain on the wounds, deficient blood circulation, alcohol, smoking, poor diet, etc. These factors can slow healing and cause wounds to reopen.

Wounds can also reopen if you lift an excessive amount of weight or make a physical effort too soon after your surgery. Rubbing or scratching wounds can also cause them to reopen.

If you notice that your wound has reopened, cover it with gauze bandages and let us know by email at: asclepiade@cmcmontreal.com.

Wound dehiscence does not usually affect the final appearance of the operated area. However, if it does, contact your surgeon.

13.4 SUBSEQUENT SURGERIES AND INTUBATION

We recommend that you wait at least three months after external surgery and six months after any endoscopic surgery before resorting to any other procedure requiring intubation.

For patients who have had glottoplasty type endoscopic surgery, you will receive a document indicating the size of the tube recommended for your subsequent intubations. You must always keep this document with you for the rest of your life. We recommend that you have this information written on a medical bracelet, which will help emergency responders.

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POSTOPERATIVE FOLLOW-UPS

IN THE WEEKS FOLLOWING YOUR RETURN HOME, WE WILL CONDUCT A FOLLOW-UP WITH YOU BY EMAIL OR TELEPHONE TO ENSURE YOUR CONVALESCENCE GOES SMOOTHLY.

CONTINUE YOUR ANNUAL VISITS WITH YOUR FAMILY DOCTOR.

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