

Shorter duration of dysphagia symptoms without stent

November 30 2015



(HealthDay)—For patients undergoing laryngotracheoplasty, posterior cricoid split laryngoplasty, tracheal resection, and cricotracheal resection, dysphagia duration is shorter for those without versus those with stents, according to a study published online Nov. 19 in *JAMA Otolaryngology-Head & Neck Surgery*.

Christen J. Lennon, M.D., from the Vanderbilt University Medical Center in Nashville, Tenn., and colleagues reviewed the [duration](#) of postoperative dysphagia symptoms and outcomes in adult patients. Medical records of 38 patients undergoing laryngotracheoplasty, posterior cricoid split laryngoplasty, tracheal resection, and cricotracheal resection and fitting the inclusion criteria were reviewed.

The researchers found that of the 17 patients with stents placed, six, six,

and five, respectively, had a suprastomal stent sewn at the top with a polypropylene suture using a horizontal mattress technique, a suprastomal stent capped with an extended Silastic thoracic T-tube segment, and either a T-tube or hood bronchial stent. While the stent was in place (up to five weeks), eight of the patients used a nasogastric feeding tube. All of the patients returned to their preoperative diet. For all patients, the mean duration of dysphagia symptoms was eight days. In [patients](#) who did not have a stent placed, the mean duration of dysphagia was 4.8 days.

"In this study of adults who underwent open airway reconstruction, all returned to their preoperative diet, but those without stents had a shorter duration of dysphagia [symptoms](#) than those with stents," the authors write.

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