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Feasibility of percutaneous dilatational tracheostomy during head and neck cancer surgery

Inn Chul Nam
The Catholic Universtiy of Korea, South Korea

Percutaneous dilatational tracheostomy (PDT) is a technique that can place a tracheostomy tube safely without visually identifying trachea. This technique has many advantages such as less bleeding, easier technique and shorter procedural time compared to conventional open tracheostomy. The aim of this study is to evaluate the feasibility of PDT during the head and neck cancer surgery. Twelve patients who underwent PDT during the head and neck cancer surgery from September 2016 to March 2018 were enrolled and their medical records were reviewed retrospectively. For comparison, medical records of another twelve patients who underwent conventional trahceostomy during the head and neck cancer surgery were randomly acquired and analyzed. PDT was performed using Ciglia Percutaneous Tracheostomy Set (Cook Critical Care, Bloomington, USA). The tracheotomy point was determined by palpation without the guidance of bronchoscopy or ultrasonography. Parameters of blood loss, procedural time, communication between the cervical wound and tracheostomy wound and complications were compared between the PDT group and the conventional group. PDT group showed less blood loss and less procedural time and less incidence of communication between the cervical wound and tracheostomy wound. On complication, there was one case of convertion to conventional tracheostomy due to wrong tracheal penetration in PDT group. There were two cases of tracheostomy site minor bleeding in convetional group. PDT is a safe and effective procedure as the adjunctive procedure during the head and neck cancer surgery.

Biography

Inn Chul Nam pursued his MD and PhD from The Catholic University of Korea, Republic of South Korea He is curently an Assistant Professor of the College of Medicine at the same university. He has served as the Head Surgeon of the Division of Head and Neck Surgery, Department of ORL-HNS of Incheon St. Mary`s Hospital.

entnam@catholic.ac.kr

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