

Speech and Language Therapy

Carol Harris
Principal SLT
Oxford Radcliffe Hospitals

1

Communication

Communication = identity?

- Speech clarity -pre/ post treatment
- Speed
- Fluency
- Voice and volume
- Nasal escape/resonance

2

Communication

- Mood/intention
- Pain
- Dentition
- Trismus

3

Swallowing

- Monitoring aspiration risks through treatment
- Maximising recovery of swallow function using compensatory postures, exercises and texture advice

4

Tumour site, size and treatment

- What has been removed? Nerves/tissue involved?
- Reconstruction- flap? sensate? mobility?
- How does surgery affect adjacent structures?
- Pre/post chemo +/- radiotherapy?
- Tracheostomy present?

5

Lips

- Mandibulotomy (eg for oral access), facial nerve involvement or lip tumour resection
- May affect lip closure
 - Implications for swallow- initiation, drooling
 - Implications for speech- p/b/m
 - Therapy; compensatory movement exercises, precision, speed

6

Tongue tip

- Speech t/d s/z ch/j
- Swallow co-ordination, bolus control, oral hygiene
- Hemiglossectomy difficulties vary according to extent of resection and use of flap or not

7

Tongue base

- Speech k/g
- Second phase of swallow affected by reduced pharyngeal/ tongue base contact
- ROM exercises for tongue base, (VF studies show effectiveness)

8

Total glossectomy

- Speech- sound substitutions
- Alternative communication options
- Swallow – initiating swallow difficult, little oral control, resultant aspiration risk, particularly if sensory loss

9

Palate

- Velopharyngeal incompetence -n/ng/
- Obdurators to reduce hyper nasality and nasal regurgitation

10

Swallowing therapy

- Range of movement exercises for jaw, lip, tongue, larynx
- Compensatory strategies e.g. head posture, second swallow on each bolus
- Appropriate textures of foods
- Thickeners in fluids
- Pain relief

11

Non oral nutrition

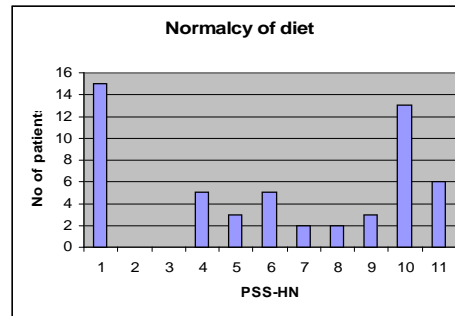
- Tube feeding – liaising with dietetics
- NG
- Gastrostomy
- Non oral plus selected oral tastes
- Supplements

12

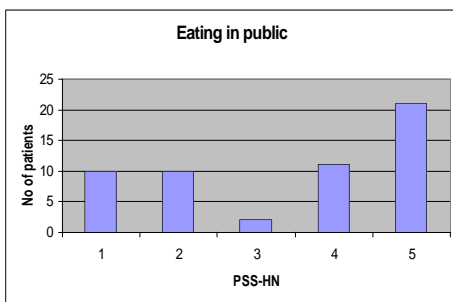
Long term functional outcomes

- 52 oropharyngeal patients at 6 months after completing treatment
- Surgery, plus adjuvant radiotherapy in 86% cases
- SLT offered to all patients

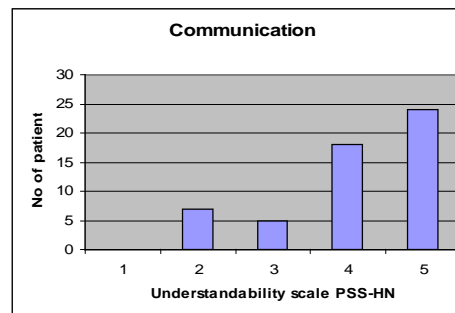
13



14



15



16

Click to add title

- Realistic information needed from all the team, about the potential effects of treatment
- Long term support/therapy may be necessary

17