

Tracheocutaneous fistula- A surgical challenge

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November 26, 2020

Abstract

We are experienced a challenge for the surgeon for tracheocutaneous fistula closure in managing such a complication such as chronic cough, infection and other co-morbidities. The need for a secondary closure is also warranted when the stoma does not close on itself within a specified time.

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ABSTRACT

Tracheostomy is a general surgical procedure performed by many surgeons on a routine basis. A tracheostomy orifice closes by secondary intention in many

Keywords:

Tracheostomy, Pectoralis major musculocutaneous flap, fistula

Key Clinical Message:

Tracheocutaneous fistula presents a challenge to the surgeon as different factors affects its formation and healing. A multidisciplinary approach and proper patient counselling, duration of cannulation.comorbidities helps in prognosis and outcome.

CASE REPORT

The patient was a 54-year-old male who is diagnosed with squamous cell carcinoma of the right vocal cord for which he had undergone microlaryngeal surgery

DISCUSSION

A tracheocutaneous fistula is commonly regarded as a pathological complication of temporary tracheostomy that results due to failure of spontaneous tract

In conclusion, TCF presents a challenge to the surgeon as different pathogenic factors affect its formation and healing. A multidisciplinary approach is ver

Author Contribution

The author confirms sole responsibility for the following: study conception and design, data collection, analysis and interpretation of results, and manuscript preparation

Conflict of interest:

The authors whose names are listed above certify that they have NO affiliations with or involvement in any organization or entity with any financial interest and no conflict of interest in the subject matter or materials discussed in this manuscript.

Acknowledgement statement:

I would like to express my special thanks of gratitude to all my colleagues and for their able guidance and support in completing my cas

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figure 1 Non healing tracheostoma

figure 2- Pectoralis musculocutaneous flap and stoma closure

figure 3 – Pus discharge from donor site

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figure 2.pdf

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