

Case Report*Open Access, Volume 5***When a voice prosthesis goes astray: A rare case of ingestion with a favorable outcome****Karima Ouardi***; Mohamed Zalagh; Bouchaib Hemmaoui; Fouad Benariba; Nourreddine Errami*Department of Otorhinolaryngology, Head and Neck Surgery, Mohammed V Military Instruction Hospital, University Mohammed V, Morocco.****Corresponding Author: Karima Ouardi**

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Description

The Provox prosthesis is a device for prosthetic voice rehabilitation after total laryngectomy, using tracheoesophageal voice. This silicone rubber shunt valve is placed in the tracheoesophageal wall, and phonation is generated when exhaled air is forced through the esophagus and neopharynx.

The Provox voice prosthesis is inserted into the tracheoesophageal puncture tract and remains in situ without the need for patient replacement.

Most complications following voice prosthesis insertion are fistula-related, such as fistula enlargement leading to leakage around the device, reduced fixation, and infections. Among these, displacement of the voice prosthesis is the most common. Rarely, inhalation or ingestion of the prosthesis can occur [1,2].

In this medical case, we describe a 72-year-old man, laryngectomized and irradiated, who received a Provox phonatory prosthesis. Displacement of the prosthesis was reported three

months later, with no other respiratory or digestive symptoms. Radiological investigations revealed that the Provox prosthesis had been ingested (Figure 1a & b). Fortunately, the patient did not experience mechanical ileus, and no laparotomy was required to remove it. The prosthesis was naturally eliminated within 48 hours.

References

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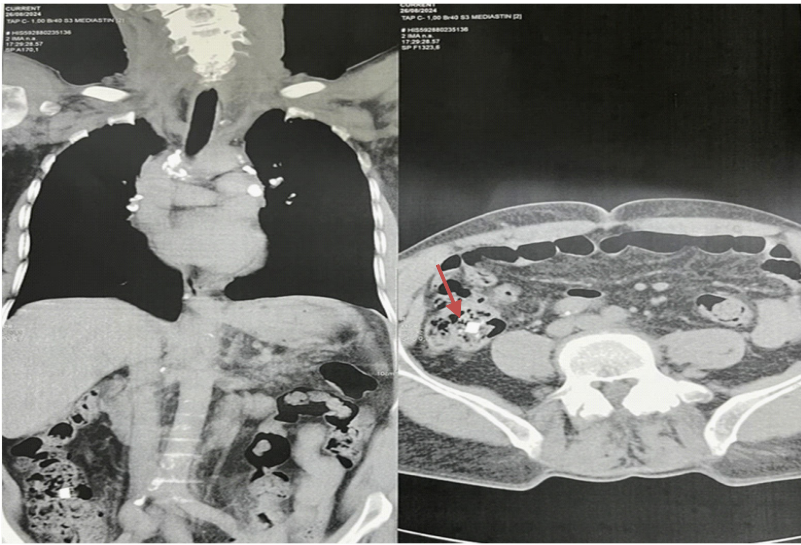


Figure 1: (A) Coronal and (B) Axial CT scan showing (red arrow) the intestinal localization of the prosthesis.