

Leczenie niewydolności podniebienneo-gardłowej metodą Furlowa i uwypukleniem tylnej ściany gardła

The management of velopharyngeal insufficiency after pharyngeal augmentations and Furlow surgery

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Summary

Introduction: The term insuffisance velopalatine was first used by Larmoyez in 1892 r. Nowadays the term is used to denote the failure of the palate to produce velopharyngeal closure that would completely block the nasopharynx from the lower pharynx during physiological processes of swallowing, blowing, speaking, breathing and ventilation of the internal auditory canal. Numerous surgical techniques used in the treatment of VPI were described in the past 100 years. Several techniques have been used to decrease the velopharyngeal space, like operations aiming at bulging of the posterior pharyngeal wall and alternating „Z-plasty” of the soft palate aiming at prolongation and improvement of the mobile function of the palate. **Material and method:** The prospective studies were carried on from May 2003 to October 2004. Patients with severe forms of VPI were qualified for surgical treatment by a phoniatrist, speech therapist and plastic surgeon. All the surgical procedures were performed by the same surgeon. Bulging of the posterior pharyngeal wall by means of corionic graft was performed in 8 patients as the first stage treatment followed by prolongation of the palate by means of Furlow's technique 6 months later. The anatomical conditions as well as speech quality prior to, after the first and the second procedure were evaluated on the basis of direct examination, speech assessment, nasofibrosopic examinations and nasometric measurements. **Results:** Examinations performed 6 months after termination of surgical treatment revealed improvement or significant improvement in speech quality, especially concerning reduced nasality, speech intelligibility and decreased nasal airflow (on an average from 48% to 33%). Five patients rated in questionnaires the outcome of treatment as „significant improvement”. **Conclusion:** Complex staged management consisting in bulging of the posterior pharyngeal wall and Furlow's operation appeared to be a successful modality of treatment in patients with severe forms of velo-pharyngeal insufficiency in about 75% of cases.