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Title: "If I don't love it, I don't swallow" – Montgomery saliva bypass tubes and the surgical challenges they address (and can cause)

Body: Background

Montgomery salivary bypass tubes are useful surgical adjuncts that can help facilitate postoperative recovery following major head and neck cancer resections, whilst maximising patient quality of life.

Methods

We report the case of a 71-year old post-laryngectomy gentlemen with prior adjuvant chemoradiotherapy and a longstanding history of a tracheal-oesophageal fistula. He presents with an asymptomatic intraabdominally dislodged Montgomery tube.

Results

Preoperative imaging showed a 19cm dislodged Montgomery tube within the stomach body. The patient underwent an urgent elective oesophagastroduodenoscopy under general anaesthetic with successful endoscopic retrieval, though this approach necessitated a successful additional neopharyngeal dilation for a post-radiation stricture. The patient made an uneventful recovery.

Conclusion

We discuss the benefits and challenges of using a Montgomery salivary bypass tube as a surgical adjunct to help reduce the risk and severity of postoperative fistulas in the context of complex head and neck cancer cases. We additionally present an unusual complication arising from their clinical use, and highlight the operative considerations and importance of a multidisciplinary approach in addressing such scenarios.

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