

Nasal obturators (for speech)

This leaflet explains about nasal obturators. If you have any further questions or concerns, please do not hesitate to contact a member of staff caring for you.

Why do I need nasal obturators?

Your consultant speech surgeon or specialist speech therapist has referred you for construction of nasal obturators because your speech is affected by too much air escaping through your nose. This happens because of a condition called velopharyngeal dysfunction (VPD).

Nasal obturators reduce the airflow through your nose during speaking and direct it through, and out of, the mouth instead. This reduces the nasal airflow when speaking and creates an increased oral pressure in the mouth to improve speech sounds. Nasal obturators are carefully custom-made for each person.

What is VPD?

VPD is a speech difficulty that occurs when the soft palate muscle at the back of the roof of the mouth does not close tightly against the back wall of the throat during speech. This causes air to escape through the nose instead of the mouth.

If VPD is affecting your speech, your speech could show one or more of the following characteristics:

- hypernasal speech (too much air vibrating in the nose)
- nasal emission or nasal turbulence (the sound of air escaping down the nose while speaking).
- speech sounds may be weak, missed out or replaced with other sounds that may be easier for you to make, for example "baby" becomes "mayme".

The likely causes of VPD are one of the following.

- A repaired cleft palate in which the muscles are still not working correctly or the palate remains too short (a cleft palate is where a baby's mouth and palate have not fused properly during pregnancy).
- A soft palate which has a 'hidden' cleft, where the soft tissues are intact but the muscles underneath are incorrectly aligned.
- A soft palate which has no cleft (gap) in it but seems too short for the space between it and the back wall of the throat.
- A soft palate that looks long enough, but where the throat is too large for it to reach across.
- A soft palate which does not move and stretch normally. This is often caused by nerve messages not getting through properly or may be for an unknown reason.

What are the alternatives to nasal obturators?

Other options include surgery, a palatal lifting device or the option of no device.

Surgery: not all patients will be suitable for surgery and your consultant speech surgeon and specialist speech therapist will discuss this with you. Surgery will depend upon your health (it may be considered too high risk for some patients) and the reason for your speech difficulties (surgery may not resolve all types of speech difficulty).

Palatal lifting device: this is an intra-oral removable device made of hard plastic that extends to the back of the mouth, lifting the soft palate. Your consultant speech surgeon and specialist speech therapist may discuss this device with you.

No device: it is your choice whether you use any devices to help with your speech. You may discuss this with your consultant speech surgeon, maxillofacial prosthetist and/or specialist speech therapist at any time.

What are nasal obturators made of and what do they look like?

Nasal obturators are made of silicone, which is a soft rubber material. They fit to the inside of your nostrils and are hollow in the middle but covered at the top. The top section has holes in, which allow you to breathe (although airflow will be reduced from what is normal for you). The number of holes will depend on the effect it has on your speech and breathing

How do I get my nasal obturators?

You will be referred to a maxillofacial prosthetist for an initial consultation. They will discuss the process with you, take consent (your agreement to treatment) and your medical history. It will take approximately three to five appointments to make your nasal obturators. At your second appointment the maxillofacial prosthetist will take impressions (moulds) of the inside of your nostrils using a rubber impression material. The impressions will only be of the nostril opening and do not extend up into the nasal cavity beyond the nostrils.

These impressions will be used to construct your nasal obturators (please note: an additional stage, where wax patterns of the nasal obturators are tried in the nose, may be needed). Your nasal obturators will then be fitted by the maxillofacial prosthetist who will assess the fit and comfort. A specialist speech therapist will attend this appointment to assess any changes to your speech.

At this appointment you will be shown how to insert and remove your nasal obturators (which you will practise in the clinic) and be told how to care for them.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

If you would like more information about our consent process, please speak to a member of staff caring for you.

When can I wear my nasal obturators?

Nasal obturators should only be worn when an improvement in speech is important. For example, when you are:

- using the telephone
- giving a speech/presentation
- during meetings
- at social gatherings.

We recommend that you should not wear your nasal obturators when speech improvement is not required, such as watching the television, reading a book or eating dinner.

- You should **not** wear your nasal obturators when exercising or during any activity that results in an increase in breathing.
- You should **not** wear your nasal obturators when sleeping.

How do I insert and remove my nasal obturators?

Your nasal obturators can be inserted into the nostrils using fingertips; using a small amount of Vaseline can help. However, take care not to use too much Vaseline as this will reduce the obturators' ability to stay in the nostrils when breathing out.

Only insert the obturators into the nostril opening, do not try to push further up into the nasal cavity. Your nasal obturators will be labelled L for left and R for right; the letter will always be positioned towards the centre of the nose which will help you orient them front and back.

To remove, simply pull the joining bar. It should not be difficult or painful to insert or remove your nasal obturators. Speak to your maxillofacial prosthetist if you are having difficulty.

Why does my breathing feel different?

Airflow through your nose will be reduced when wearing your nasal obturators; this is needed to provide the improvement in your speech. You will still be able to breathe in and out. If you cannot breathe in and out it is likely the obturators are blocked and require cleaning. If your breathing is continually uncomfortable when wearing the nasal obturators please discuss this with your maxillofacial prosthetist.

How and when do I clean my nasal obturators?

Your nasal obturators are made of silicone and can be easily cleaned using soap and water. The soap you use for washing your hands is acceptable and warm or cold water can be used. Clean your nasal obturators every time you remove them and always dry thoroughly before wearing or storing them.

You may experience breathing difficulties through the nose when wearing the nasal obturators for longer periods of time. This is because natural nasal secretions of the nose block the holes in the top of the nasal obturator. When this happens you will need to remove and clean the nasal obturators.

Do **not** use chemicals, hot or boiling water, or abrasives to clean your nasal obturators as it will damage the silicone.

How do I store my nasal obturators?

After cleaning your nasal obturators dry them fully and store them in a small pot or box. Do not store them wet or damp as this can encourage bacteria to grow.

Avoid contact with any heat sources, for example radiators or direct sunlight, as this will damage the silicone.

How many appointments will I need?

You will continue to have regular follow-up appointments with your maxillofacial prosthetist for as long as you continue to use your nasal obturators. This is to monitor your progress, highlight any concerns and decide when the nasal obturators need replacing.

You may also have follow-up appointments with your specialist speech therapist who will assess your progress with the nasal obturators.

How long will my nasal obturators last?

The length of time your nasal obturators will last depends on several factors including, how often you wear them, how long you wear them for and how well you look after them. During your review appointments the silicone will be examined for signs of wear and the devices will be remade when your maxillofacial prosthetist thinks it is appropriate.

IMPORTANT: If you notice any tears in the silicone, if the join between the two parts of the nasal obturators become separate due to the silicone breaking, or if you notice any damage or change of shape, **stop wearing your nasal obturators immediately and contact your maxillofacial prosthetist.**

What should I do if I have a problem?

Allergic reactions are very rare, however, if you notice any irritation such as redness or a rash from wearing the nasal obturators stop wearing them immediately and let your maxillofacial prosthetist know and contact your GP if necessary.

Your nasal obturators sit in your nostrils. While every effort has been made to reduce the risk of inhalation of the devices and ensure your nasal obturators are safe you must remain vigilant.

IMPORTANT: If your nasal obturators move further up into the nasal cavity and you cannot remove them, or you think they have been inhaled further, you will need to **attend your nearest Emergency Department (A&E) immediately.**

The likelihood of this occurring is very rare as your nasal obturators are joined, this is only likely to occur if they become separate and you continue to wear them. Please remember to stop wearing your nasal obturators if they become separated and contact your maxillofacial prosthetist as soon as possible.

Useful sources of information

The Cleft Lip and Palate Association (CLAPA) is a registered charity and support group for families and patients with cleft lip and/or palate. Visit www.clapa.com for more information. NHS Choices also has useful information <http://www.nhs.uk/conditions/Cleft-lip-and-palate/Pages/Introduction.aspx>

Contact us

If you have any questions or concerns about your nasal obturators, please contact 020 7188 7188 Extension: 56449 (Monday to Friday, 9am to 5pm). Please leave a message and contact number and your query will be responded to as soon as possible. Alternatively you can email maxfacprosthetics@gstt.nhs.uk

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch:

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

t: 0800 731 0319 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk/membership

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