What happens next?

Once the procedure is over, the ST will give you a summary of the results. Your child **may be** referred for a speech videofluoroscopy (a moving X-Ray) that gives a different view of how the soft palate and throat muscles move during speech. An appointment will be made for your child to see the Plastic Surgeon to discuss the results and treatment suggestions that may be required.

How can I prepare my child?

- Explain what will happen during the procedure
- Remind your child to keep still during the procedure
- Explain that the procedure is not painful but just a little ticklish
- Practise counting 1 10 with your child, and get him/her to repeat the words and sentences given by the ST (e.g., See if you can spot the spider)

Important information

- Contact the Cleft and Craniofacial Centre (CCRC) to reschedule the appointment if your child is unwell.
- The procedure will take place at the ENT Centre, Children's Tower, Level 2.
- Register 10 minutes before your child's appointment time.
- Avoid having any hot food and/or drinks for 1 hour after the procedure if local anaesthetic was given.
- No fasting is required for the procedure.

For appointment enquiries, contact the Cleft and Craniofacial Centre, Women's Tower, Level 5

Phone: 6394-1521

Email: ccrc@kkh.com.sg

Website: tinyurl.com/KKHCCRC

Useful telephone number

6294-4050



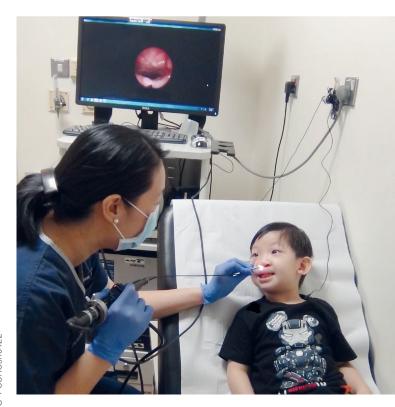
100 Bukit Timah Road Singapore 229899 Tel: 6394-5049 Fax: 6394-3773

Website: www.kkh.com.sg

www.facebook.com/kkh.sg



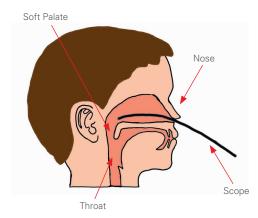
Speech Nasendoscopy



Reg No 198904227G PCCRCsn0422

What is a Speech Nasendoscopy?

A Speech Nasendoscopy is a procedure that allows us to see how well the soft palate (back of the roof of the mouth) and throat muscles move when your child talks. A small flexible tube (scope) with a tiny video camera and light source at the tip is first passed into your child's nose, then pushed in to view the palate and throat muscles.



What is the purpose of a Speech Nasendoscopy?

If your child's speech has a 'nasal' quality (too much air vibrating in the nose), it may be a sign that the soft palate is not moving well against the back of the throat, to separate the mouth from the nose when he/she talks. Sometimes, food and drink can also go up into the nose. This procedure allows the Plastic Surgeon and Speech Therapist (ST) to study the way the soft palate and throat muscles move during speech. This will help them decide on the best treatment for your child's speech difficulties.

If your child has had surgery to correct the position of the soft palate or throat muscles, this procedure may be repeated one year after the surgery. This allows the Surgeon and ST to check the new movements of the re-positioned muscles.

What will happen during a Speech Nasendoscopy?

First, a nose spray (a local anaesthetic) will be used. This will make the nose feel a little numb, and help your child feel more comfortable during the procedure.

While the anaesthetic is taking effect, the scope will be placed in your child's mouth. The ST will video record how the soft palate and other structures in your child's mouth looks. These may include the teeth, tongue, or any openings in the roof of the mouth.





Scope inserted into mouth

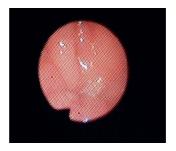
Scope inserted into nose

The scope is then placed into the nose and passed gently backwards as your child is speaking. Once the scope is in the correct position (just above the soft palate, near the side and back walls of the throat), your child will be asked to asked to count and copy words and sentences after the ST.

Usually, a child may go for a Speech Nasendoscopy once they turn 4 years of age. Younger children may be able to cooperate, and must be able to copy words and sentences to attend the procedure.

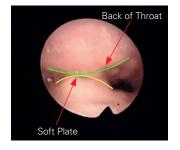
Normal and Abnormal Closure Patterns

Normal



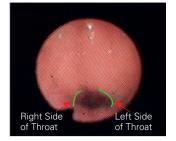
When talking, no gaps in the throat are seen.

Abnormal



Poor movement of the throat muscles may lead to gaps on either side of the soft palate.

Abnormal



When talking, the soft palate is unable to close against the back of the throat, leading to a central gap.

What to expect as a caregiver?

You will be in the room with your child, and may sit next to your child. The whole procedure will be video recorded and you can watch it on the screen as it happens.

How long does the procedure take?

The procedure will take about 10 minutes, but the appointment may last about 30 to 45 minutes to include discussion time.