

Chapter 1 : Dr. Donald Sesso, East Norriton, PA () OtorrinolaringÃ³logo

Sesso is a member of the American Academy of Otolaryngologyâ€™Head and Neck Surgery, American Academy of Sleep Medicine, American Medical Association, American Osteopathic Association and the American Osteopathic College of Otolaryngologyâ€™Head and Neck Surgery. read more.

Airway obstructions are diagnosed by evaluating your signs and symptoms. Doctors look for signs that include: During an emergency, your doctor will likely order an X-ray first to determine the cause of your symptoms. If an X-ray fails to determine the cause of the obstruction, your doctor may choose to order more advanced testing. This may include a bronchoscopy. During this procedure, your doctor inserts an instrument called a bronchoscope through your mouth or nose to look into your lungs for any foreign bodies. Bronchoscopy can also help your doctor evaluate different causes of obstruction. This includes tracheomalacia weakness and collapse of the trachea. It also includes infectious causes, such as mucous plugging in patients with chronic lung conditions like emphysema and cystic fibrosis. Your doctor may also order a laryngoscopy. During this procedure, your doctor will examine your larynx with an instrument called a laryngoscope. Additional tests may include a CT scan of the head, neck, or chest to determine other sources of obstruction, such as epiglottitis an infection and inflammation of the epiglottis. The epiglottis is the flap of tissue that protects and covers your trachea to prevent food and foreign bodies from entering. How is an airway obstruction treated? An airway obstruction is usually an emergency situation. Call if you see someone experiencing an airway obstruction. The Heimlich maneuver This is an emergency technique that may help a person who is choking on a foreign object: They should repeat these five abdominal thrusts until the object becomes dislodged or emergency services arrive. If following the Red Cross technique, repeat the cycle of five back blows and five abdominal thrusts until the object becomes dislodged or emergency services arrive. Epinephrine Epinephrine can be used to treat airway swelling due to an allergic reaction. People with severe allergies, such as those with allergies to food or bee stings, can develop sudden and rapid swelling of the throat and tongue. This can lead to near or complete airway obstruction within minutes. People who have severe allergies usually carry EpiPens. These are simple injectors containing epinephrine. People who carry EpiPens are instructed to deliver one injection into the outer thigh as soon as they experience symptoms of a severe allergic reaction. An epinephrine injector can help a person experiencing anaphylactic shock while they are waiting for medical services to arrive. Medical professionals should always evaluate people who receive epinephrine injections as soon as possible. Cardiopulmonary resuscitation CPR Cardiopulmonary resuscitation CPR is used when a person is unable to breathe and has lost consciousness. It keeps oxygenated blood flowing to the brain until emergency services arrive. Place the heel of your hand in the center of their chest. Place your other hand on top, and use your upper body weight to push straight down on the chest. You should do this about times in a minute until an ambulance arrives. Once an ambulance has arrived, there are several different ways airway obstruction can be treated based on what caused it. An endotracheal or nasotracheal tube may be inserted into the airway. This can help get oxygen through swollen airways. A tracheostomy and cricothyrotomy are surgical openings made in the airway to bypass an obstruction. These procedures should be performed by highly trained medical professionals and are generally required when all of the above interventions have failed. Prognosis after an airway obstruction With prompt treatment, an airway obstruction can often be treated successfully. However, airway obstructions are extremely dangerous. They can be fatal even with treatment. If you or someone you know may have an airway obstruction, get help immediately. Prevention of an airway obstruction Many types of airway obstructions can be prevented. Reduce your risk by doing the following: Avoid drinking a lot of alcohol before eating. Eat small bites of food. Supervise small children when eating. Chew thoroughly before swallowing. Make sure your dentures fit properly. Keep small objects away from children. Visit your doctor regularly if you have a condition that can cause a chronic airway obstruction. Medically reviewed by Nancy L.

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Chapter 2 : Products | Ventinova

- a serip-s review of upper airway surgery for treatment of adult obstructive sleep apnoea - separations for sleep apnoea (mainly overnight stays in sleep centres) in Australia between and increasing by % for private patients and by % for public.

Chapter 3 : Dr. Donald Sesso, DO | Berger/Henry ENT Specialty Group, East Norriton, PA

SLEEP, Vol. 33, No. 10, Surgical Modifications of the Upper Airway for OSA in Adults Caples et al only reported surgical "success" without precise outcomes data on individual study subjects were excluded.

Chapter 4 : Treatment for Upper Airway Resistance Syndrome | Stanford Health Care

A substantial portion of patients with obstructive sleep apnea (OSA) seek alternatives to positive airway pressure (PAP), the usual first-line treatment for the disorder. One option is upper airway surgery. As an adjunct to the American Academy of Sleep Medicine (AASM) Standards of Practice paper.

Chapter 5 : Illawarra Paediatric & Adult Sleep, Respiratory, and Paediatric Centre | SERVICES

More than 18 million Americans have Obstructive Sleep Apnea (OSA), but more than 90% of cases still remain undiagnosed. This source offers a thorough review of.