

Opinion Article

## Long-Term Patient-Centered Approach to Tracheostomy in Burn Rehabilitation

## Shen Fuyu\*

Department of Critical Care Medicine, Shanghai Jiao Tong University, Shanghai, China

## DESCRIPTION

Burn injuries constitute a significant global health concern, resulting in substantial morbidity, mortality and economic burden. Severe burn injuries often necessitate advanced airway management due to compromised respiratory function. Tracheostomy, a surgical procedure involving the creation of an opening in the trachea, is commonly performed in burn patients requiring prolonged mechanical ventilation. While tracheostomy is a critical life-saving intervention, its long-term effects on patient outcomes remain relatively unexplored, particularly in the context of burns. Burn injuries, especially those involving the head and neck region, can lead to critical airway compromise due to factors such as edema, inhalation injury and thermal damage. Tracheostomy serves as a vital intervention to secure the airway, optimize ventilation and facilitate pulmonary hygiene. The procedure entails the surgical creation of a stoma in the trachea, through which a tracheostomy tube is inserted for mechanical ventilation. Tracheostomy is commonly considered in burn patients when extended ventilator support is anticipated, often due to the severity of the burn injury and associated respiratory complications.

Tracheostomy can have lasting effects on respiratory mechanics and lung function. Prolonged dependence on mechanical ventilation can lead to reduced lung capacity, decreased exercise tolerance and heightened susceptibility to respiratory infections. The presence of a tracheostomy tube can impact vocal cord function, resulting in altered voice quality and speech production. These changes may contribute to communication challenges and impact psychosocial well-being. The tracheostomy site often leaves a visible scar. Scarring may not only affect the patients appearance but also have psychological and emotional implications, potentially impacting self-esteem and body image. The altered body image and changes in communication associated with tracheostomy may contribute to emotional distress, including anxiety, depression and feelings of isolation.

The presence of a tracheostomy tube may lead to perceived stigma, resulting in social withdrawal and isolation due to communication difficulties and negative societal perceptions. Patients with long-term tracheostomies often need to adjust to changes in self-care, activities of daily living and social interactions, which can impact psychological adaptation and coping mechanisms. Tracheostomy may impede patients ability to perform daily activities independently, potentially affecting their overall quality of life. Long-term tracheostomy patients may encounter challenges in pursuing education or employment due to physical limitations and communication difficulties. The presence of a tracheostomy can place additional burdens on caregivers, affecting their own well-being and quality of life.

Effective rehabilitation and support for long-term tracheostomy patients require a multidisciplinary team, including respiratory therapists, speech-language pathologists, psychologists and social workers. Patients and caregivers can benefit from training in communication strategies, such as speech therapy and the use of augmentative and alternative communication Psychological support, counseling and participation in peer support groups can aid in managing emotional challenges associated with long-term tracheostomy. Comprehensive longitudinal studies are essential to track the evolution of physical, psychological and quality of life outcomes over time in burn patients with tracheostomies. A deep understanding of long-term outcomes can inform healthcare providers in delivering patient-centered care that takes into account the holistic needs of burn patients with tracheostomies.

## CONCLUSION

The preliminary exploration of long-term patient outcomes after tracheostomy in burns underscores the significance of a comprehensive understanding of both physical and psychosocial implications. As burn patients with tracheostomies encounter a unique set of challenges, addressing their long-term needs necessitates a multidisciplinary and patient-centered approach.

Correspondence to: Shen Fuyu, Department of Critical Care Medicine, Shanghai Jiao Tong University, Shanghai, China, E-mail: shnfyu@gmail.com

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