

Speaking and Swallowing after Glossectomy Surgery

Speaking

Glossectomy surgery involves having part or all of the tongue removed. The tongue is used to clearly produce:

- vowels such as **a, e, i, o, u**
- consonants such as **t, d, k, g, l, n, r**

Consonants are needed to make speech clear. Some sounds are made using your lips, so you may be able to make sounds such as **b, m, p, w** after a glossectomy. When part of the tongue is removed, it can be hard to speak and be understood by others.

The Speech-Language Pathologist will assess your ability to speak clearly. Sometimes people need only a few speech therapy sessions, while others may need to learn other methods to communicate such as computers or gestures.

People who have all of their tongue removed will need to write and/or use technology such as mobile devices (e.g., tablets, ipod) to help with communication. You will also learn gestures to help you speak.

After you go home, you can have therapy with a Speech-Language Pathologist to help improve your speech. This can be arranged for you while you are in the hospital or you can contact your Doctor or the Speech-Language Department after you are home. Call 905-521-6101.

Swallowing

Glossectomy surgery can also affect swallowing. This will depend on the amount of tongue removed. The tongue is needed to control food or liquid in your mouth and push it backwards to swallow. After you have had time to heal, your Doctor or Speech-Language Pathologist will decide how you will manage food and liquid.

A Dietitian will help you learn:

- what food to eat
- how much to eat
- how to prepare your food