Message from Guest Editor

Voices of Hope and Innovation: Advancing Tracheostomy Research and Care

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Dear Readers,

I am delighted to welcome you to the third issue of the *Tracheostomy Journal*. This issue includes a message from the leadership of the Global Tracheostomy Collaborative, along with several compelling articles.

This issue follows the successful 8th International Tracheostomy Symposium, held virtually on November 1-2, 2024. The event attracted an international audience, including individuals with a tracheostomy and their families, speech-language pathologists, respiratory therapists, nurses, social workers, and physicians. Attendees engaged with visionary keynote speakers, empathized with stories shared by individuals with a tracheostomy, and discussed clinical questions and initiatives from hospitals around the globe. The Editorial Board invites and encourages attendees and presenters from the Symposium to submit their manuscripts to the *Tracheostomy Journal* for peer-review.

This issue opens with a poem titled *"The window of hope,"* written by the family member of a person living with a tracheostomy. The poem draws on the emotive impact of tracheostomy on personhood, family dynamics, relationships and lifestyle. The poem communicates hope and longing for tracheostomy decannulation, speaks to the notion of unconditional love and caregiver devotion, and captures the plea for healthcare professionals to view their patients and their families as partners in care and humanity.

Research to date has demonstrated the immense challenges that patients and their families face when living with a long-term tracheostomy, and the importance of healthcare professionals and systemic support.[1-5] One of the key drivers of the Global Tracheostomy Collaborative is fostering partnerships between individuals with a tracheostomy, their families, caregivers and healthcare professionals in delivering high-quality tracheostomy care.[6] Healthcare professionals are increasingly becoming aware of the priorities and needs of patients and striving to better address them. Newman et al.[7] conducted a qualitative systematic review and meta-synthesis exploring what matters most to adults with a tracheostomy in intensive care units and the implications for clinical practice.

The second article, *"Tracheostomy tube monitoring accessory to detect accidental decannulation and obstruction emergencies in ventilator-independent pediatric patients"* describes the development of a novel pediatric tracheal breathing model system. This innovation assists in testing new tracheostomy tube technologies designed to identify emergency events, such as accidental decannulation and airway obstruction. Tracheostomy-related adverse events in infants and children remain common.[8-10] With no existing effective technology available to address this issue, the article introduces a new clinically promising option.

The next article, *"Difficult airway response team outcomes in an academic emergency department: a prospective, multidisciplinary airway management cohort study,"* examines the implementation of an interprofessional airway team in the emergency department of an academic, tertiary center in the United States. This prospective observational cohort study evaluates outcomes such as first-attempt intubation success, intubation techniques, and the need for a surgical airway. Evidence suggests that a dedicated difficult airway response team can mitigate risks associated with emergency airway management, and studies to date have highlighted improved outcomes with similar airway response teams in other settings.[11-13]

The final article *"The challenging complication of acquired tracheoesophageal fistulas: a case report,"* highlights a rare complication of prolonged tracheal intubation or tracheostomy.[14,15] This case report illustrates the negative sequalae that can occur in the setting of prolonged hospital length of stay.[16,17]

As a speech-language pathologist (SLP), I am inspired by the increasing emphasis on functional outcomes, communication, and patient safety highlighted in this issue. Communication is central to the identity and well-being of individuals with tracheostomies, and ensuring access to speech, voice, and swallowing interventions is crucial. This issue emphasizes the need for an interprofessional approach to tracheostomy care, where functional outcomes are prioritized alongside medical and surgical considerations. I hope this issue encourages readers to continue advancing patient-centered care through innovative research and collaboration.

Thank you for your support of the *Tracheostomy Journal*. I hope you find this issue both engaging and thought-provoking, and I encourage you to consider submitting your own work to future editions.

Take care and best wishes,
Charissa Zaga

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REFERENCES

1. Nakarada-Kordic I, Patterson N, Wrapson J, Reay SD. A systematic review of patient and caregiver experiences with a tracheostomy. *The Patient-Patient-Centered Outcomes Research*. 2018;11:175-191.

2. Johnson RF, Brown A, Brooks R. The family impact of having a child with a tracheostomy. *The Laryngoscope*. 2021;131(4):911-915. doi:10.1002/lary.29003

3. Amar-Dolan LG, Horn MH, O'Connell B, et al. This is how hard it is. Family experience of hospital-to-home transition with a tracheostomy. *Annals of the American Thoracic Society*. 2020;17(7):860-868.

4. Bonvento B, Wallace S, Lynch J, Coe B, McGrath BA. Role of the multidisciplinary team in the care of the tracheostomy patient. *Journal of multidisciplinary healthcare*. Published online 2017:391-398. doi:10.2147/JMDH.S118419

5. Nageswaran S, Gower WA, King NM, Golden SL. Tracheostomy decision-making for children with medical complexity: What supports and resources do caregivers need? *Palliative & supportive care*. 2024;22(4):776-782.

6. Brenner MJ, Pandian V, Milliren CE, et al. Global Tracheostomy Collaborative: data-driven improvements in patient safety through multidisciplinary teamwork, standardisation, education, and patient partnership. *British journal of anaesthesia*. 2020;125(1):e104-18. doi:10.1016/j.bja.2020.04.054

7. Newman H, Clunie G, Wallace S, Smith C, Martin D, Pattison N. What matters most to adults with a tracheostomy in ICU and the implications for clinical practice: a qualitative systematic review and metasynthesis. *Journal of critical care*. 2022;72:154145.

8. Wynings EM, Breslin N, Brooks RL, et al. Accidental tracheostomy decannulations in children—A prospective cohort study of inpatients. *The Laryngoscope*. 2023;133(4):963-969.

9. Ong T, Liu CC, Elder L, et al. The Trach Safe Initiative: a quality improvement initiative to reduce mortality among pediatric tracheostomy patients. *Otolaryngology–Head and Neck Surgery*. 2020;163(2):221-231.

10. Watters KF. Tracheostomy in infants and children. *Respiratory Care*. 2017;62(6):799-825.

11. Tankard KA, Sharifpour M, Chang MG, Bittner EA. Design and implementation of airway response teams to improve the practice of emergency airway management. *Journal of Clinical Medicine*. 2022;11(21):6336.

12. Pandian V, Ghazi TU, He MQ, et al. Multidisciplinary difficult airway team characteristics, airway securement success, and clinical outcomes: a systematic review. *Annals of Otology, Rhinology & Laryngology*. 2023;132(8):938-954.

13. Kuhar HN, Bliss A, Evans K, et al. Difficult Airway Response Team (DART) and airway emergency outcomes: a retrospective quality improvement study. *Otolaryngology–Head and Neck Surgery*. 2023;169(2):325-332.

14. Paraschiv M. Tracheoesophageal fistula-a complication of prolonged tracheal intubation. *Journal of medicine and life*. 2014;7(4):516.

15. Diddee R, Shaw IH. Acquired tracheo-oesophageal fistula in adults. *Continuing Education in Anaesthesia, Critical Care & Pain*. 2006;6(3):105-108.

16. Mathisen DJ, Grillo HC, Wain JC, Hilgenberg AD. Management of acquired nonmalignant tracheoesophageal fistula. *The Annals of thoracic surgery*. 1991;52(4):759-765.

17. Macchiarini P, Verhoye JP, Chapelier A, Fadel E, Dartevelle P. Evaluation and outcome of different surgical techniques for postintubation tracheoesophageal fistulas. *The Journal of Thoracic and Cardiovascular Surgery*. 2000;119(2):268-276.