

Children with Tracheostomies: Speaking Valves

Speaking valves

A speaking valve is placed on a tracheostomy tube for the development of talking and communication.

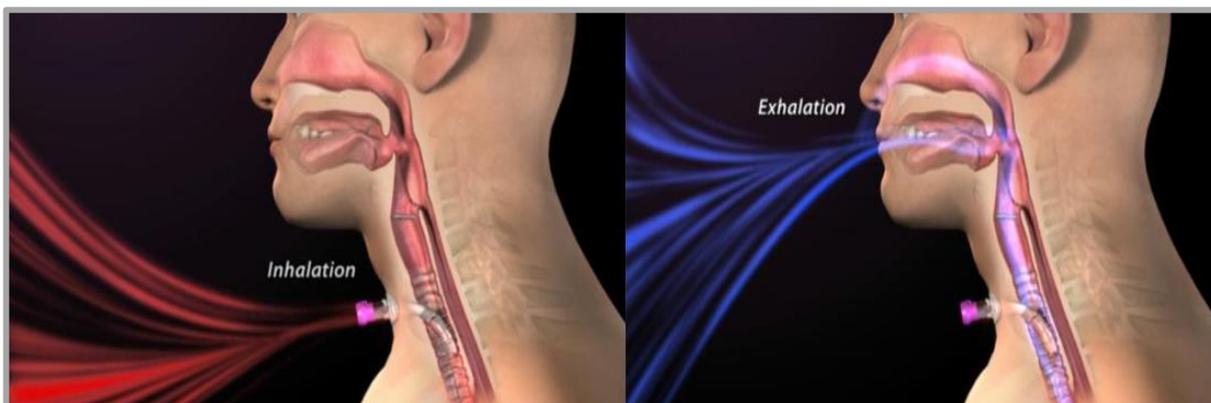
Not all children can wear a speaking valve. A speech language therapist (SLT) will assess whether your child can wear one. The benefits of a speaking valve may also include:

- Restoration of normal expiratory (breathing out) airway pressures
- Improved sense of smell and taste
- Improved swallowing
- Improved secretion management
- Improved overall development and quality of life.



A speaking valve replaces the Swedish nose or mini-vent your child would usually be wearing. They can still receive humidification when wearing a speaking valve.

A speaking valve is a one-way closed position 'no leak' valve that attaches to the hub of the tracheostomy tube. When your child breathes in, the valve opens and air enters the trachea and lungs. When your child breathes out, the valve closes and air is directed out around the tracheostomy tube through the voice box and out of the mouth and nose.



If your child is on a ventilator, a speaking valve can be placed 'in line'.

If your child has a tracheostomy tube with a cuff, the cuff must be deflated before the speaking valve is placed. If your child has breathing difficulties with a speaking valve on, remove it immediately.

Using a speaking valve

When can it be worn?

Your child will only wear a speaking valve when they are awake. It must be removed when your child is asleep.

Other times when the speaking valve should not be worn:

- When they are unwell or having severe airway obstruction, e.g. thick and copious secretions.
- If your child has vocal cord paralysis
- If your child has severe neurological damage
- If the tracheostomy cuff is inflated
- If there is a severe risk of aspiration

If your child only wears a speaking valve for a short time, the speech language therapist will provide activities to increase time of use.

How to put it on/take it off:

- It might be necessary to suction before you place the speaking valve. Having a distraction while placing the valve may be helpful, e.g. a toy or story.
- Hold the flange of the tracheostomy, gently push the speaking valve onto the hub of the tracheostomy and give a quarter turn clockwise.
- To remove, hold the flange of the tracheostomy, quarter turn anti-clockwise and pull off gently.
- Monitor for comfort. If your child is looking distressed and cannot be calmed, remove the speaking valve.

Cleaning instructions:

- Swish the speaking valve in soapy, warm water (not hot water). Rinse thoroughly with warm water. Allow it to air dry thoroughly before placing in the storage container. Do not apply heat to dry the speaking valve.
- Do not use hot water, peroxide, bleach, vinegar, alcohol, brushes or cotton swabs to clean the speaking valve.