

Let's Get Started Provox® XtraHME™ Options

After your laryngectomy, the function of the nose and upper airways are lost because you are breathing through your stoma instead of your nose. The air you breathe is not warmed or humidified, often resulting in increased mucus production and coughing. To compensate for the humidifying effect your upper airway previously provided, you now need a Heat and Moisture Exchanger (HME). The HME is placed over your stoma and held in place by an adhesive or a stomal attachment. The HME conditions and humidifies your airway - similar to what your nose once did. Most people who consistently use a Provox Heat and Moisture Exchanger 24/7 experience fewer problems with coughing and mucus production.^{1,2}



1. Work with your clinician to find a Provox® Adhesive or a stomal attachment that works best for you:
 - Try different types and shapes of adhesives to find the best fit.
 - Try other attachment methods such as a Provox® LaryTube™ or Provox® LaryButton™.
2. Work with your clinician to determine the most effective HME:
 - Provox® XtraMoist™ HME - humidification is superior and good airflow is maintained. Closest to normal nasal function.
 - Provox® XtraFlow™ HME - delivers superior airflow. Ideal for those who prefer lower resistance breathing and also great to use when exercising or adapting to using an HME.
3. Keep track of the changes in your pulmonary symptoms:

It may take some days or weeks of continuous HME use (24 hours a day, 7 days a week) before you start to notice the reduction in coughing and mucus production. In the beginning, it may seem to increase. This is normal.

Write down the number of coughs per day before you start using the HME. Now write down the number of coughs after using the HME on days 7, 14, 21 and 28. Your coughing should diminish. If it does not, consult your clinician.

Number of coughs	
Before HME use	
Day 7 of HME use	
Day 14 of HME use	
Day 21 of HME use	
Day 28 of HME use	

¹Ackerstaff AH, et al: Multicenter study assessing effects of heat and moisture exchanger use on respiratory symptoms and voice quality in laryngectomized individuals. JAAO 2003; 126: 705 – 712. ²Hilgers FJM, et al: A new heat and moisture exchanger with speech valve (Provox® Stomafilter). JCO, 1996; 21: 414-418.

4. Use the Provox HME correctly:

- The HME cassette is not reusable and cannot be rinsed in water or any other solution - this washes out the special salt that is essential for HME effectiveness.
- Use a Provox HME 24 hours a day, 7 days a week – just like your nose.
- Change your Provox HME at least once every 24 hours or more often if it has become clogged with mucus.

Tip: Remove the HME if you need to cough.

Tip: Wipe, never rinse, any secretions that may have collected on the HME.