

Botulinum Toxin Type A (Xeomin)

Information for patients / carers / families following salivary gland injection

Aim of injection:

Xeomin is a type of drug called a *Botulinum Toxin Type A*, which can be injected into the salivary glands to reduce the production of saliva, sometimes referred to as 'spit'. Every day, adults produce up to 1.5 litres of saliva, however, you probably will not realise as usually you will automatically swallow every few minutes without thinking about it. However, when someone's swallow function is not working correctly, they can get a build up of saliva in their mouth. This sometimes causes drooling out of their mouth (anterior drooling) which may cause wet clothing, sore skin and be upsetting for the individual, or it can cause the saliva to gather in the mouth and upper airway (posterior drooling) which may result in saliva ending up in the lungs (aspiration), leading to infections. Some adults produce excessive saliva which can often be caused by medication side effects or by airway irritation from the tracheostomy tube.

Sometimes this drooling, anterior or posterior, will not cause any problems however occasionally, it may need to be managed with medications if the individual is at risk of aspirating (saliva going 'down the wrong hole' and into their lungs), causing infections or is preventing any progression with tracheostomy weaning. There are lots of medications that can be trialled however unfortunately, many of them have side effects which your medical professional will go through in detail with you when discussing salivary gland injections.

Potential benefits of injection:

- Reduced saliva production with aims to reduce drooling (anterior or posterior)
- Longer term effect (up to 12 – 16 weeks) without the need for repeated injections or daily medications
- Reduced risk of aspiration related chest infections
- Reduced need for alternative medication prescribing which has more common side effects
- May help to support with tracheostomy weaning

Potential risks of injection:

- Dry mouth following injection
- Problems with swallowing (dysphagia)
- Inflammation (swelling) of the gland which is injected
- Infection at the injection site
- Bleeding at the injection site
- Nerve injury including the facial nerve

It is important that you are aware of the potential risks associated with the injections to make an informed decision as to whether you want to go ahead with the procedure. Your health care professional will be able to discuss the risks and steps taken to reduce the risks in further detail during your initial consultation.

Post-injection monitoring:

After you have the injections, it is important to make sure that you closely monitor the injection site for any signs of infection (redness, warm to touch, soreness, discharge) and inform the team immediately. The site should be kept clean and dry until fully healed. A dressing will be applied after the injection however this can be removed shortly afterwards as soon as any mild bleeding has stopped.

If you notice any changes to your swallow (difficulty swallowing or coughing when swallowing), it is important that you contact the team straight away so that they can provide additional advice. During this time, it may be useful to try foods of a different consistency which you may find easier to swallow but if you are concerned that your swallow is unsafe, you must seek urgent medical help.

If you experience any swelling to your face / neck, changes to your facial movements or feel unwell following the injections, you must seek urgent medical help via your GP, 111 or 999

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Please note that digital formats of this information are available at
www.lancsteachinghospitals.nhs.uk

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