

Management of Hoarseness in Primary Care

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Tom Jones scraps show

Resorts World Sentosa (RWS), organisers of the Tom Jones event, announced that the concert had been called off due to Jones' being 'genuinely ill'.

Welsh singing icon Tom Jones has cancelled his show at Resorts World Sentosa (RWS) - again.

The 69-year-old singer's doctor has advised him against carrying on with the show on Thursday night as he 'could risk serious permanent damage to his vocals'.



Objectives

- What you should cover in the history
- What you should cover on examination
- What treatment should you offer
- When to refer
- What we can offer

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1. Ask about onset and pattern

Gradual, prolonged

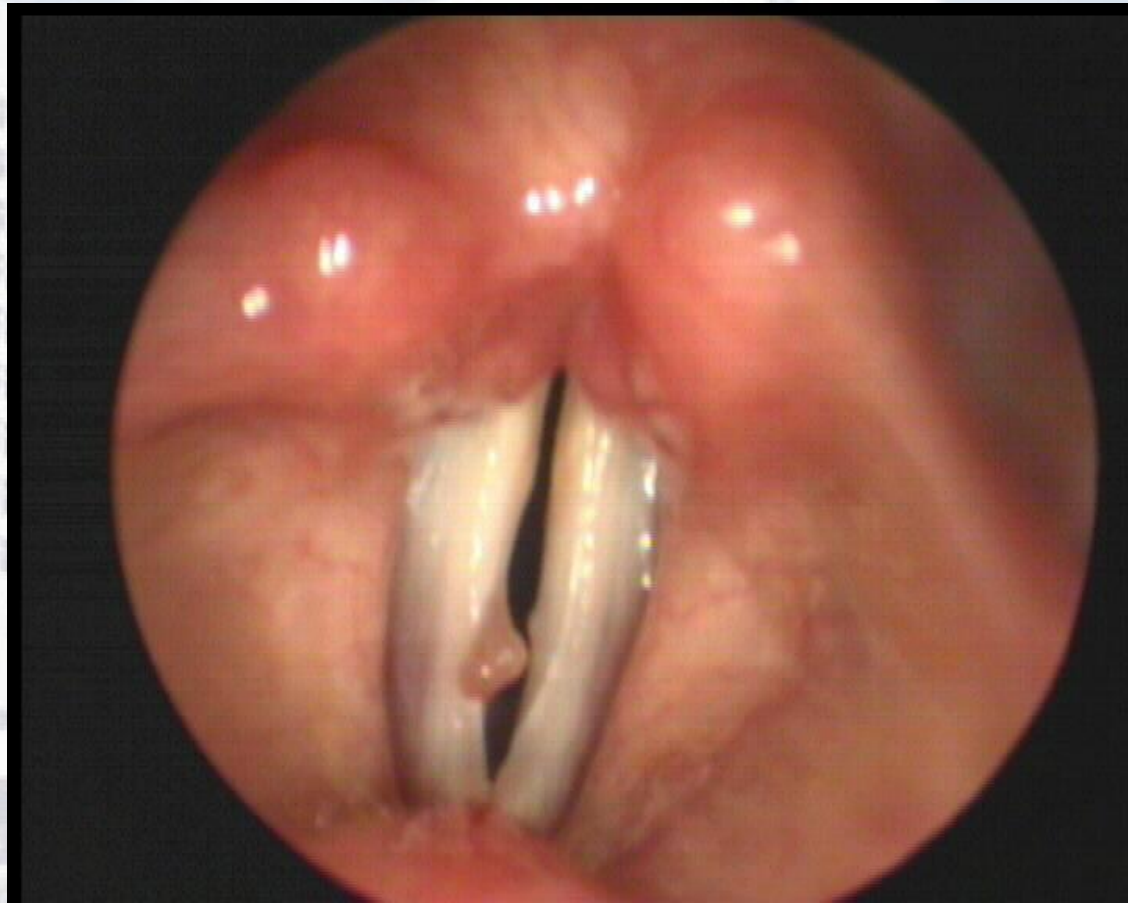
- Vocal strain / muscle tension
- Reflux disease
- Nodules, Cysts
- Dysplasia / Cancer

Sudden, severe

- Laryngitis
- Haemorrhage
- (Psychogenic)

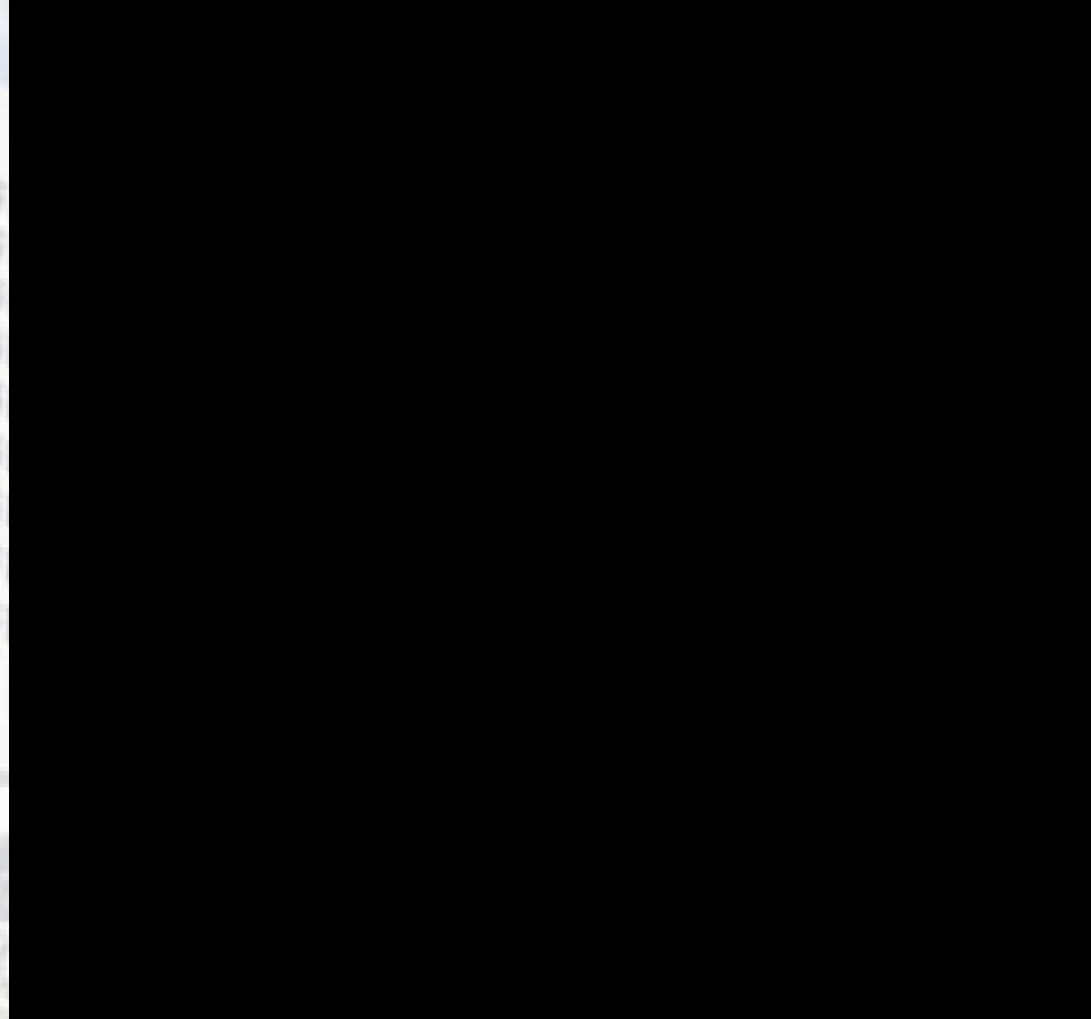
2. Ask about recent respiratory tract illness

- Coughing can cause vocal fold damage
- Talking / teaching through a respiratory illness is damaging



3. Ask about...

- a. Throat pain
- b. Dysphagia
- c. Referred otalgia



4. Ask about smoking and drinking...

- The relative risk (RR) of laryngeal cancer between smokers and non-smokers is 15.5 (men) and 12.4 (women)
- Drinking 100g alcohol per day (7 standard drinks) confers an RR of 15 of laryngeal cancer
- Using an additive risk model, combined use increases the risk by 50%



5. Assess voice use and impact on QOL

- Teachers, promoters, sales persons
- Singing in choir, karaoke
- Ask about vocal 'hygiene' and dietary habit
- Young children



6. Reflux

10. Neurological
disease

7. Chest disease

9. Trauma

8. Thyroid
disease or
surgery

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Assess voice quality

GRBAS scale used
by speech
therapists:

G – Grade

R – Roughness

B – Breathiness

A – Aesthenia

S - Strain

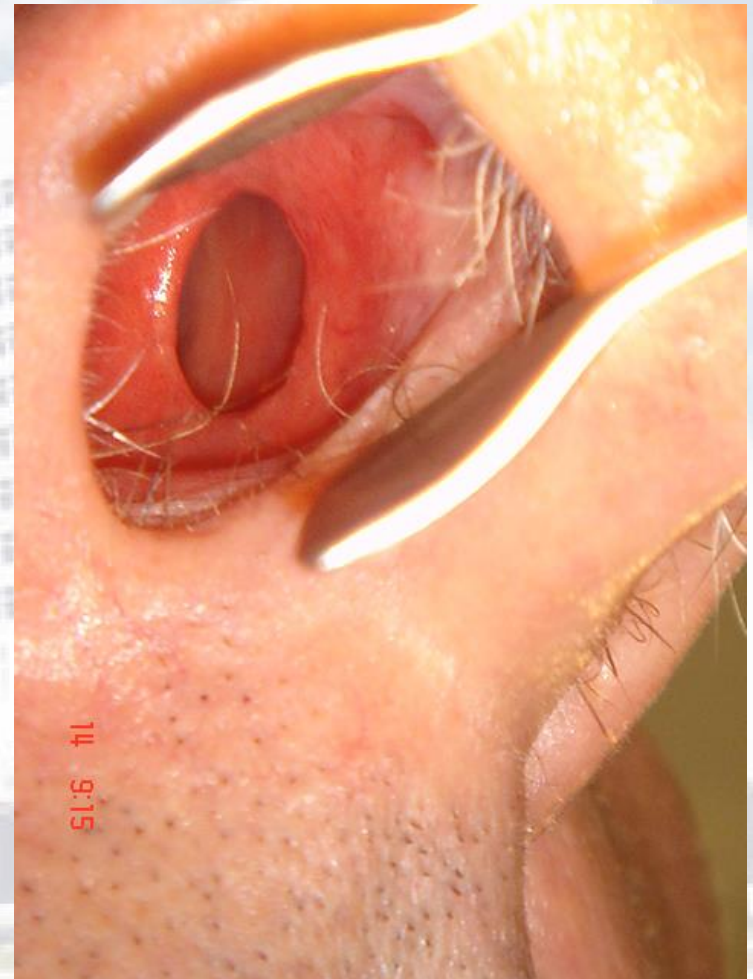


Examine the larynx?



Examine the nose

- Rhinorrhoea
- Turbinate hypertrophy
- Nasal polyps



Examine the neck

- Thyroid masses
- Cervical nodes, particularly in supraclavicular fossa



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Simple measures first!

Things that work!

- Adequate hydration
- Avoid strain
- Avoid caffeine
- Improve dietary habit
- Smoking cessation
- Alcohol reduction

Things that don't!

- Mentholated lozenges
- Mucolytics
- Danzen

Treat the obvious!

- Treat URTIs
- Treat Rhinitis
- Treat obvious reflux

STATEMENT 5A. ANTI-REFLUX MEDICATION AND HOARSENESS. Clinicians should not prescribe anti-reflux medications for patients with hoarseness without signs or symptoms of gastroesophageal reflux disease (GERD). *Recommendation against prescribing based on randomized trials with limitations and observational studies with a preponderance of harm over benefit.*

STATEMENT 5B. ANTI-REFLUX MEDICATION AND CHRONIC LARYNGITIS. Clinicians may prescribe anti-reflux medication for patients with hoarseness and signs of chronic laryngitis. *Option based on observational studies with limitations and a relative balance of benefit and harm.*

quality of life (QOL). Hoarseness affects nearly one-third of the population at some point in their lives. This guideline applies to all age groups evaluated in a setting where hoarseness would be identified or managed. It is intended for all clinicians who are likely to diagnose and manage patients with hoarseness.

radiation treatment to the neck, a history of tobacco abuse, and occupation as a singer or vocal performer; 3) the clinician should visualize the patient's larynx, or refer the patient to a clinician who can visualize the larynx, when hoarseness fails to resolve by a maximum of three months after onset, or irrespective of duration if a serious underlying cause is suspected; 4) the clinician should

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STATEMENT 6. CORTICOSTEROID THERAPY: Clinicians should not routinely prescribe oral corticosteroids to treat hoarseness. *Recommendation against prescribing based on randomized trials showing adverse events and absence of clinical trials demonstrating benefits with a preponderance of harm over benefit for steroid use.*

STATEMENT 7. ANTIMICROBIAL THERAPY: Clinicians should not routinely prescribe antibiotics to treat hoarseness. *Strong recommendation against prescribing based on systematic reviews and randomized trials showing ineffectiveness of antibiotic therapy and a preponderance of harm over benefit.*

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Red flags

- Stridor
- Neck masses
- Dysphagia ,
odynophagia or
referred otalgia
- Smoker or drinker with
> 3 weeks of
hoarseness



Immediate < 24
hours



Urgent < 2
weeks

Refer all other cases that are not resolving after 6 weeks

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Direct access Voice Clinic

3 surgeons and 2 speech therapist

Video stroboscopy

Full complement of phonosurgery – laser surgery and external framework surgery



SHE SAID

Yelling can hurt your vocal cords. So can whispering, because it causes unnecessary friction on the vocal muscles.

Francoise Lim, speech therapist

In a voice clinic, a device called a laryngeal stroboscopy is used to examine the voice box.

While surgery can help, Dr Jeevendra added that it is important to note that not all voice problems require surgical treatment. Jeraldine's treatment involved therapy sessions, during which she was taught exercises to use her voice without straining the vocal cords and the surrounding muscles.

"I used to rush from class to class, without drinking any water in between. Therapy helped me recognise that I hadn't been looking after my voice. Even the ways that I was breathing and projecting my voice in class were all wrong," she said.

Thankfully, encouragement and advice from her doctor and speech therapist have helped her find her voice again.

(Above) Dr Jeevendra Ganapalingam, consultant at TTSH's department of otolaryngology conducting a video stroboscopy on a patient.

(Below) Ms Francoise Lim, principal speech therapist at TTSH, showing how to do the lip trills voice exercise.



Photo courtesy: TTSH

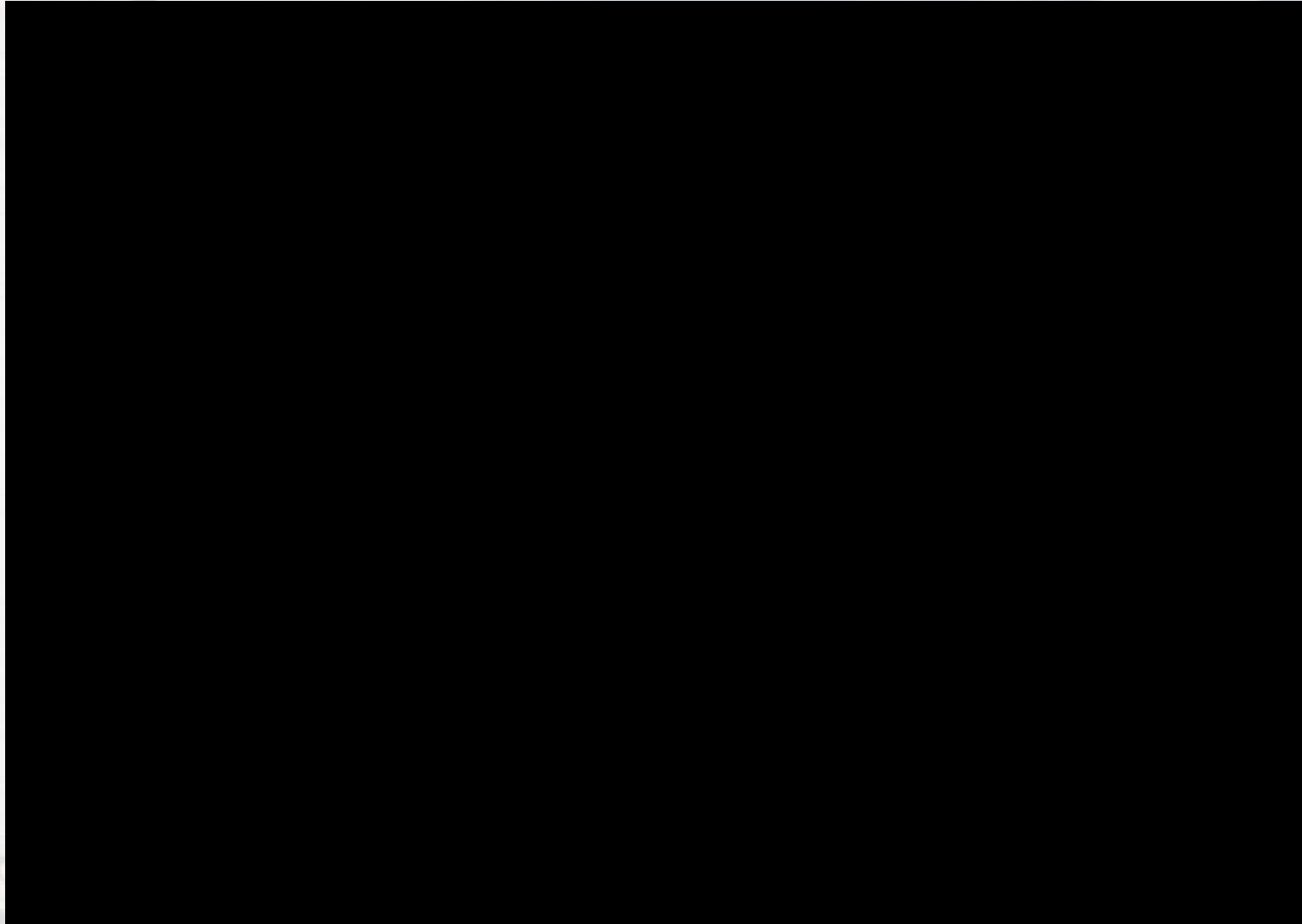
TREAT YOUR VOICE WELL

Tip from TTSH principal speech therapist Francoise Lim

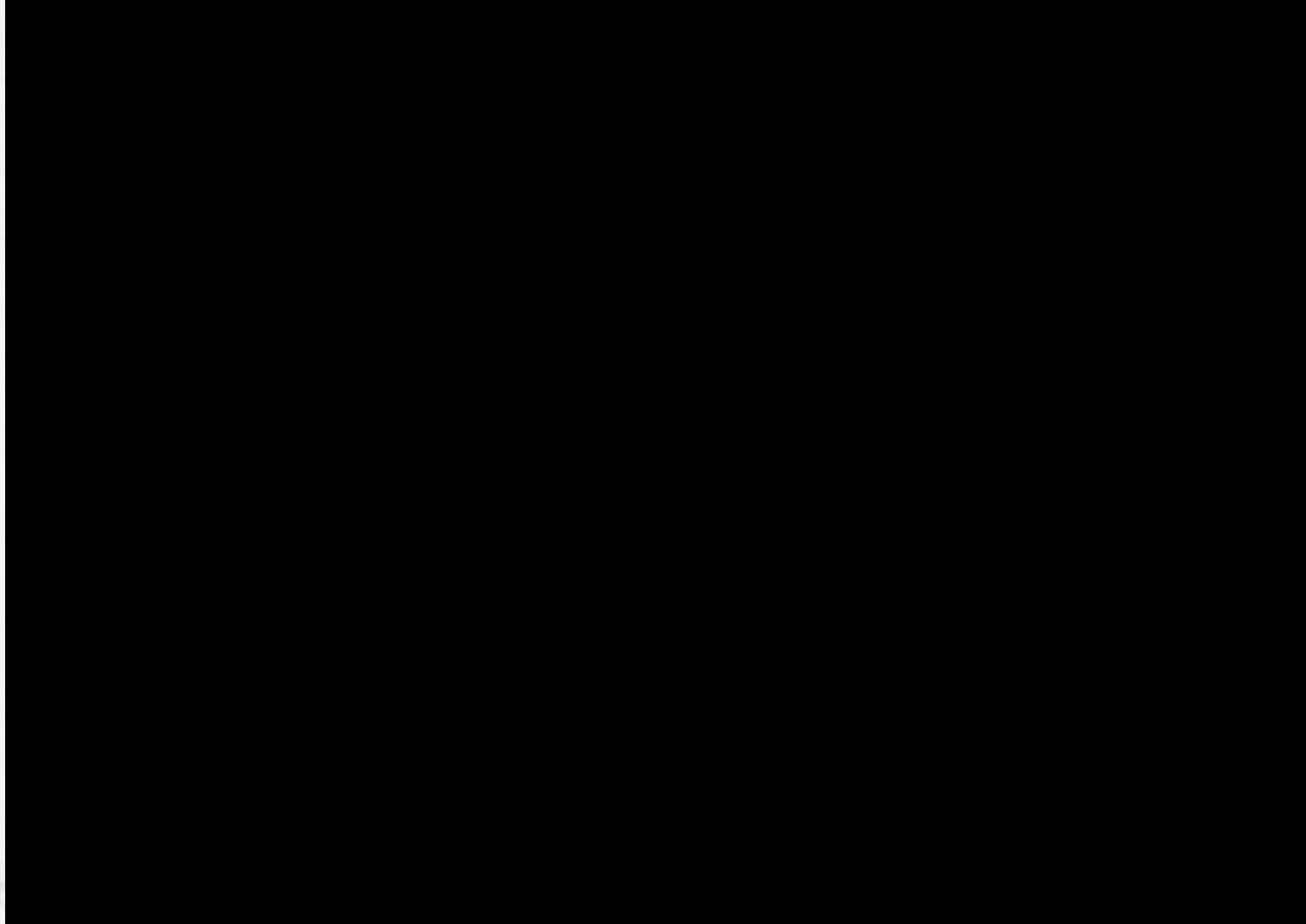
- Keep your throat well-hydrated with frequent sips of water.
- Try not to compete with background noise.
- Sub out.

UCH

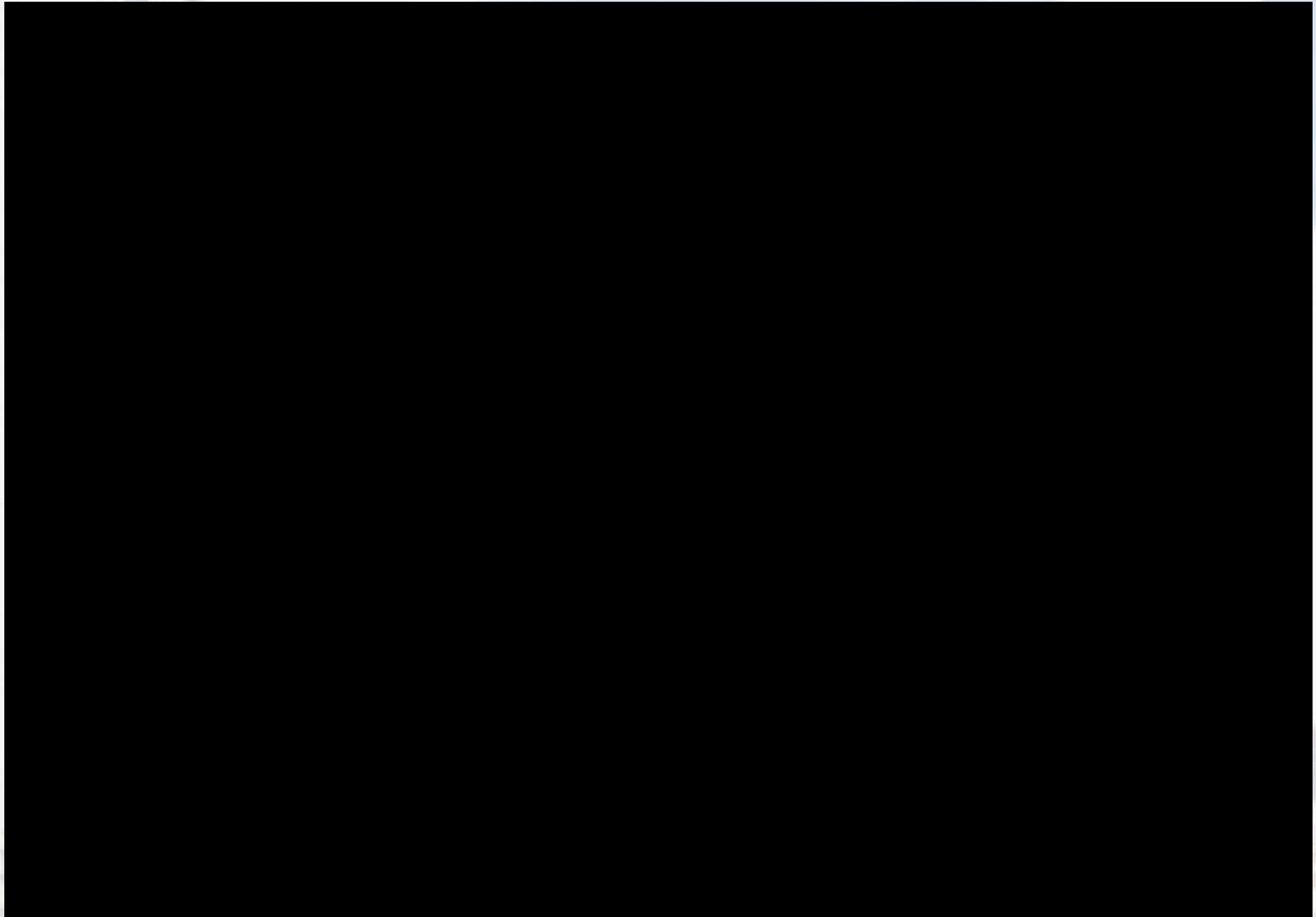
A Singapore Idol finalist!



Vocal nodules in a teacher



Cord palsy due to lung cancer



Most cases do not require surgery

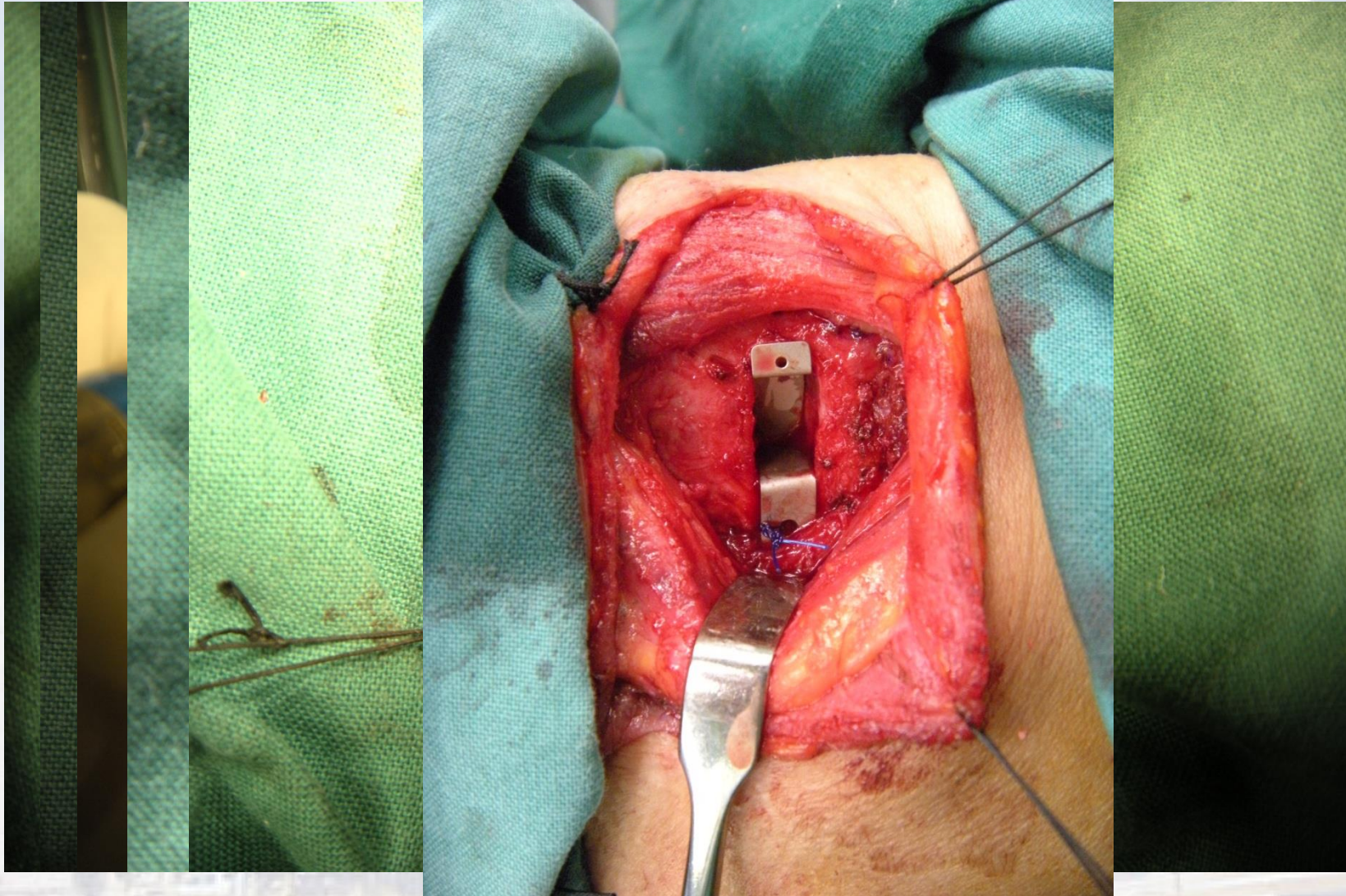
Medical measures

- Medical treatment of reflux
- Vocal hygiene
- Speech therapy
- Gastroenterology and neurology assessments

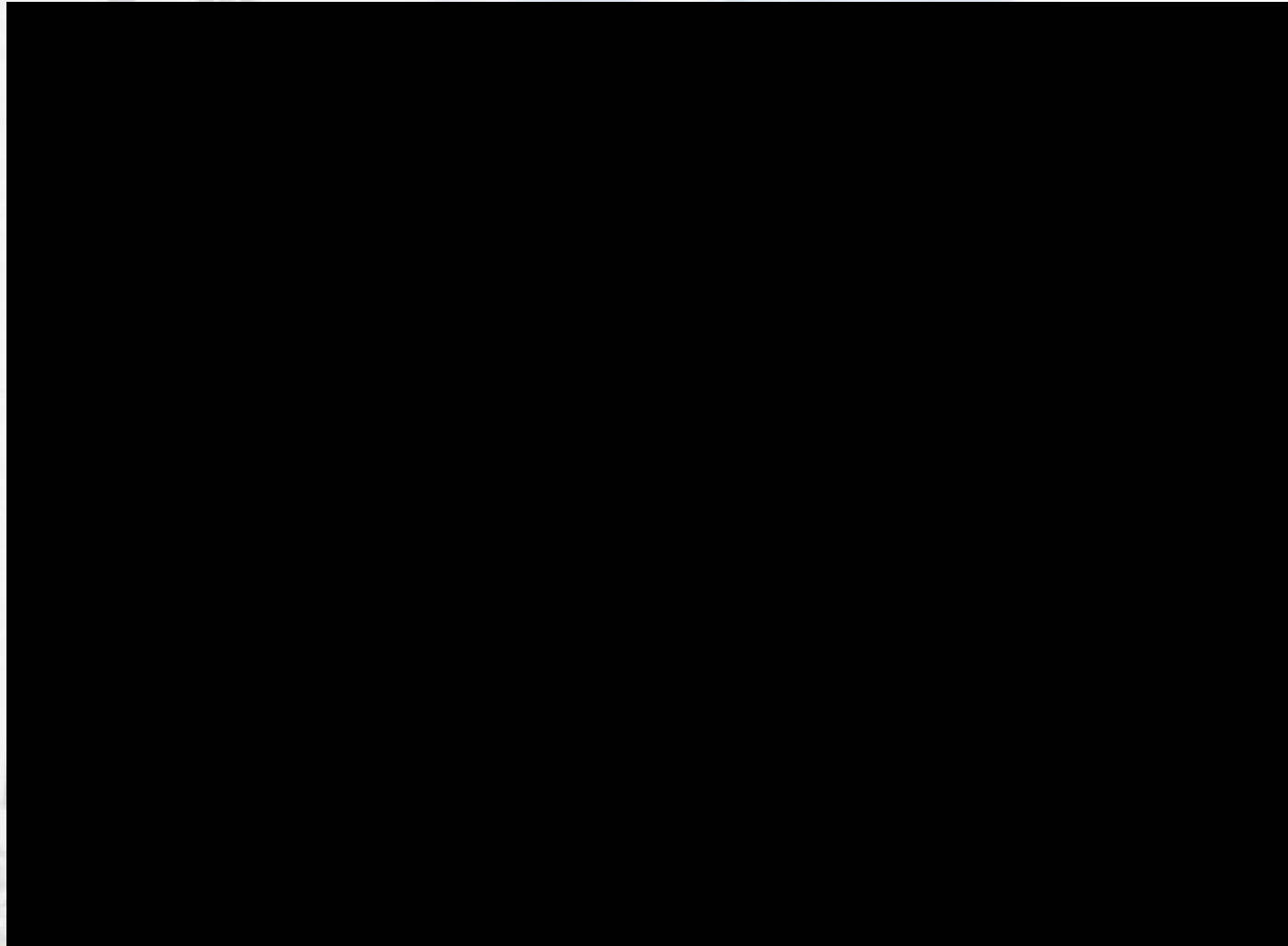
Surgery

- Endoscopic laryngeal microsurgery
- Botox injections for spasmodic dysphonia
- Laser surgery
- External framework surgery

Medialisation thyroplasty with titanium



Medialisation thyroplasty with titanium implant





Tan Tock Seng
HOSPITAL



a community of care





Endoscopic Laryngeal Microsurgery





Tan Tock Seng
HOSPITAL



a community of care



Thank You