

GUIDE TO

VOICE &
THROAT
PROBLEMS

SYMPTOMS, CAUSES, AND TREATMENTS

MEDICAL INFORMATION DISCLAIMER:

This book is not intended as a substitute for the medical advice of physicians. The reader should regularly consult a physician in matters relating to his/her health and particularly with respect to any symptoms that may require diagnosis or medical attention. The authors and publisher specifically disclaim any responsibility for any liability, loss, or risk, personal or otherwise, which is incurred as a consequence, directly or indirectly, of the use and application of any of the contents of this book.

TABLE OF CONTENTS

Introduction	4
Voice Disorders	5
Hoarseness	6
Laryngitis	7
Reinke's Edema	8
Spasmodic Dysphonia (Laryngeal Dystonia)	9
Vocal Cord Lesions (Cysts, Nodules, and Polyps)	10
Vocal Cord Paresis or Paralysis	11
Other Throat Problems	13
Dysphagia (Swallowing Disorders)	14
Laryngeal and Pharyngeal Cancers	15
Laryngeal Papillomatosis	17
Laryngopharyngeal Reflux (LPR)	17
Salivary Gland Diseases and Disorders	18
Tonsillitis	20
In Conclusion	22

INTRODUCTION

Are you experiencing a problem affecting your voice or throat? Some voice and throat problems can seem to come on very suddenly, while others occur gradually or recur time and time again. The one thing voice and throat problems all have in common is that you shouldn't ignore them! There are too many essential functions that can be affected if you have a condition of the voice or throat—your speech, breathing, eating, and swallowing. Some conditions can even spread to other parts of your body. If you have symptoms of a voice or throat disorder or disease, it's important to have a consultation with a dedicated ear, nose, and throat (ENT) physician.



VOICE DISORDERS

Our specialists at C/V ENT Surgical Group, which serves the greater Los Angeles and Thousand Oaks areas, will often utilize various scopes and likely video stroboscopy to determine the cause of your voice disorder and then plan a proper treatment course.

HOARSENESS

WHAT IT IS:

Hoarseness is an abnormal voice change, often an alteration in voice quality, volume, and/or pitch. In itself, hoarseness is actually not a voice disorder, but a symptom. It's usually caused by some change to the vocal cords in the voice box (larynx). The speaking and singing voice is produced by vibrating vocal cords coming together as air leaves the lungs. If something causes a change to the vocal cord structure, it can lead to hoarseness.

SYMPTOMS:

Hoarseness itself is a symptom. A hoarse voice may sound breathy, raspy, or strained. There may also be changes in voice volume or pitch.

CAUSES:

There are a number of possible causes for hoarseness, including:

- Vocal abuse or misuse
- Common cold, allergies, or upper respiratory illness
- Laryngitis
- Vocal cord lesions (nodules, polyps, and cysts)
- Vocal hemorrhage
- Gastroesophageal reflux disease (GERD)/Laryngopharyngeal Reflux (LPR)
- Smoking
- Neurological disorders
- Vocal cord paresis
- Certain cancers of the throat

TREATMENTS:

In order to determine the cause of hoarseness, an ENT will often complete a full evaluation, including taking a health history, and completing an examination of the patient's ear, nose, and throat. Often a patient will undergo a laryngoscopy, a diagnostic procedure in which a small, flexible scope is passed through the nose in order for the physician to view the vocal cords. Once the physician is able to determine a cause for hoarseness, treatment will follow a prescribed plan for the specific diagnosis.

LARYNGITIS

WHAT IT IS:

Laryngitis is the inflammation of the vocal cords because of illness or overuse. It can lead to hoarseness or near-total loss of voice. Acute laryngitis is a single case that lasts less than three weeks (but typically only a few days up to a week), while chronic laryngitis is when the problem lasts longer than three weeks or is recurrent.

SYMPTOMS:

Hoarseness is a major symptom of laryngitis. Other common symptoms are voice loss or weakness; a feeling of discomfort, tickling or soreness in the throat; coughing or throat dryness; sneezing; nasal congestion; and fever.

CAUSES:

Laryngitis is most commonly caused by a minor illness but can be an indication of an underlying, more serious illness, particularly if laryngitis is persistent or recurring, or occurs alongside other symptoms. Some causes of laryngitis include:

- Common cold, allergies, and upper respiratory illness
- Voice abuse or misuse
- Smoking
- Alcohol abuse
- GERD/LPR
- Thyroid disorders
- Rheumatoid Arthritis (RA)
- Parkinson's disease

TREATMENTS:

Acute laryngitis can typically be treated at home by trying to decrease exposure to irritants (such as smoking or poor air quality); using a humidifier; resting the voice; and using over-the-counter medications to manage the discomfort of minor symptoms. Chronic laryngitis may require a thorough exam by a qualified ENT and often an underlying cause must be treated. Rarely, if there is a complication of laryngitis or if there is an underlying condition, surgery may be required.

REINKE'S EDEMA

WHAT IT IS:

Located just under a thin tissue layer covering the vocal cords, Reinke's space is a gelatinous layer that allows for the vibration of the vocal cords to produce sound. Reinke's edema is the swelling or build-up of fluid within Reinke's space and is considered a benign polyp.

SYMPTOMS:

Symptoms of Reinke's edema usually include a change in voice quality, particularly causing the voice to sound raspy, rough, hoarse, or low-pitched.

CAUSES:

The most common cause of Reinke's edema is smoking, but it can be caused by a number of other things, or a combination of factors, including:

- Vocal cord irritation from GERD/
LPR
- Voice misuse or abuse
- Hypothyroidism

Because of the symptom of deepening or raspy voice, Reinke's edema is more commonly noticed in women, and it is more common for it to occur in those who are middle-aged or older and have a long history of smoking.

TREATMENTS:

Depending on the cause of the Reinke's edema, patients will be recommended to take steps such as quitting smoking, managing GERD/LPR, or resting the voice. These steps may stop the progression of the edema, but won't make it go away. Some people may qualify for and choose to have surgery, usually an outpatient procedure in which a laryngoscope is inserted through the mouth and the polyp can be removed from the vocal cords, without an external incision. This surgery may be followed by voice therapy.

SPASMODIC DYSPHONIA

(LARYNGEAL DYSTONIA)

WHAT IT IS:

Spasmodic dysphonia is a rare neurological condition that affects the muscles of the voice box (larynx). Those with spasmodic dysphonia experience periodic involuntary spasms of the muscles inside the vocal cords.

SYMPTOMS:

Spasmodic dysphonia can cause the voice to sound strained or as if it's breaking frequently, sometimes every few sentences or every few words. Sometimes symptoms are mild, but they can become progressively worse.

CAUSES:

Causes of and risk factors for spasmodic dysphonia aren't known, but it typically develops gradually. Symptoms sometimes are identified after a laryngeal injury, voice misuse or abuse, or an upper respiratory infection.

TREATMENTS:

An examination by an ENT, neurologist, or speech pathologist is needed to diagnose spasmodic dysphonia. Through an examination of the vocal cords, an ENT can diagnose or rule out other voice disorders that may be causing the same symptoms. The condition has no cure, but treatments can help patients manage symptoms. The most common treatment is an injection into the laryngeal muscles to weaken them and prevent the nerve impulse causing spasms. Injections tend to help for three to four months, but symptoms will gradually return, and the patient can have a reinjection. Others may opt for voice therapy, which may help reduce symptoms in mild cases.

VOCAL CORD LESIONS

(CYSTS, NODULES, AND POLYPS)

WHAT IT IS:

There are several different types of benign growths that fall into the category of vocal cord lesions.

- Vocal cord nodules are callus-like bumps that tend to grow on both sides of the vocal cords, directly opposite each other.
- Vocal cord polyps are often larger than nodules, more full of blood vessels, and may look like blisters. Unlike nodules, polyps usually appear as growths on only one side of a vocal cord.
- Vocal cord cysts are less common than other types of vocal cord lesions. They are a growth containing a sac of fluid on the vocal cords.
- A reactive vocal cord lesion is a growth that develops opposite an existing vocal cord lesion from the repeated irritation caused by the lesion on the facing side of the vocal cord.

SYMPTOMS:

A change in the voice's quality, including hoarseness or strain, may indicate a vocal cord lesion. Other symptoms may include:

- Pitch limitations
- Pain with the effort of speaking or singing

CAUSES:

Vocal cord cysts and nodules can be caused by voice abuse or misuse. (Repeated overuse or misuse of the voice is such a common cause of vocal cord nodules that they are sometimes called “singer’s nodes”.) Likewise, voice overuse or abuse can also cause vocal cord polyps, but polyps can also be caused by a single instance, rather than repeated misuse or abuse. Polyps can also be caused by irritants, such as smoking. Vocal cord cysts can be caused by trapped mucus in the voice box glands. Vocal cord polyps and cysts can also be caused by LPR or a severe viral illness and GERD can worsen symptoms of vocal cord cysts.

TREATMENTS:

Vocal cord lesions can be diagnosed and examined using laryngoscopy. Vocal cord cysts and polyps that are significantly impacting the voice will not go away on their own, and surgery followed by voice therapy are often the best treatment course. Reactive vocal cord lesions and vocal nodules will usually decrease or disappear with voice rest and voice therapy.

VOCAL CORD PARESIS OR PARALYSIS

WHAT IT IS:

When regular vocal cord function is disrupted due to partial loss of nerve function to the voice box (larynx), it’s called vocal cord paresis. When there is a complete loss of the same kind of nerve function, it’s vocal cord paralysis. The condition can range from mild to severe and can be temporary or permanent.

SYMPTOMS:

Some signs of vocal cord paresis or paralysis are similar to many other voice disorders, including:

- Breathiness
- Hoarseness
- Changes or loss of vocal pitch
- Loss of voice volume

Other symptoms are more serious and can even be dangerous because the vocal cords also function to protect the airway and prevent choking on food, drink, and saliva. Rarely, paralysis can occur in both of the vocal cords, which can be a serious condition, affecting the ability to breathe and swallow. Additional signs of vocal cord paresis or paralysis include:

- Choking or coughing while swallowing
- Loss of the gag reflex
- Persistent throat clearing
- The need for frequent breaths when talking

CAUSES:

Sometimes the cause of a case of vocal cord paresis or paralysis is unknown. Some known causes are paresis or paralysis as a result of damage, inflammation, or disruption to nerves affecting the voice box from:

- Throat, neck, or upper chest surgery
- Throat, neck, or upper chest trauma
- Viral infection
- Stroke
- Benign or cancerous tumors near muscles or nerves that impact the voice box
- Some types of cancer
- Lyme disease
- Epstein-Barr virus
- Herpes
- Neurological conditions (such as multiple sclerosis or Parkinson's disease)

TREATMENTS:

Developing a treatment plan for vocal cord paresis or paralysis depends on the cause. It can sometimes be resolved with injections or voice therapy, but often requires surgery followed by voice therapy. Depending on the cause and the extent of the damage or illness, full recovery of the voice may not be possible, but some function of the vocal cords can still be addressed.

OTHER THROAT PROBLEMS

There are a wide variety of head and throat conditions, in addition to those listed below. If you experience symptoms of pain, discomfort, or functional problems in the throat, it's best to contact an ENT specialist.

DYSPHAGIA

(SWALLOWING DISORDERS)

WHAT IT IS:

Dysphagia simply means the symptom of difficulty in swallowing. It can occur to anyone, but is more common in the elderly. Dysphagia can occur in any of the four stages of the swallowing process:

- **Oral preparation stage:** Food or liquid is chewed to prepare for swallowing.
- **Oral stage:** The tongue pushes the food or liquid to the back of the mouth, initiating the swallowing response.
- **Pharyngeal stage:** Food or liquid is passed through the pharynx and into the esophagus.
- **Esophageal stage:** The food or liquid passes through the esophagus and into the stomach.

SYMPTOMS:

Dysphagia symptoms can vary depending on the cause. Common symptoms include:

- Feeling like food gets stuck in the throat, esophagus, or behind the breastbone
- Choking or coughing from ingesting food or drink
- Delayed or unresponsive swallowing
- Painful swallowing
- Regurgitation

CAUSES:

Dysphagia can have a number of causes, including:

- Problems with the teeth or dentures
- Illness, such as the common cold
- GERD/LPR
- Hypertension
- Diabetes
- Thyroid disorders
- Neurological conditions
- Medication side effects
- Vocal cord paresis or paralysis
- Some kinds of cancer
- Damage from surgery or radiation therapy in the head, neck, or esophagus.

TREATMENTS:

Since dysphagia is in itself a symptom, it's very important to have an ENT perform an exam of the mouth and throat, often through laryngoscopy, in order to develop a treatment plan. A swallowing study or other tests may be needed as well. Depending on the cause, treatment for dysphagia can involve anything from specialized therapy or medication to surgery.

LARYNGEAL AND PHARYNGEAL CANCERS

WHAT IT IS:

The formation of cancer cells on the tissue of the voice box (larynx) is known as laryngeal cancer. Pharyngeal cancer is found in the pharynx, which is behind the mouth and nasal cavity, above the voice box and esophagus.

SYMPTOMS:

Some of the signs of laryngeal or pharyngeal cancer include:

- Sore throat and/or cough that won't go away
- Painful swallowing
- Difficulty swallowing
- Difficulty breathing
- Coughing up blood
- Pain in the ear or jaw
- The appearance of a lump in the throat or neck
- Neck or throat swelling
- Hoarseness
- Unexplained weight loss
- Vocal changes, including changes to pitch or volume

CAUSES:

Smoking is the leading cause of throat cancers like laryngeal and pharyngeal cancers, but other factors can increase the risk:

- Using other tobacco products
- Alcohol abuse
- Family history of throat cancer
- Poor diet (not eating enough fruits and vegetables, overconsuming processed foods)
- Asbestos exposure
- Human papillomavirus (HPV)
- Immune system disorders

TREATMENTS:

A laryngoscopy, biopsy, or imaging tests may be needed in order to reach a diagnosis. A full treatment plan depends on the extent and stage of the cancer and may include radiation therapy, chemotherapy, and/or surgery.

LARYNGEAL PAPILOMATOSIS

WHAT IT IS:

Laryngeal papillomatosis is the growth of benign tumors inside the voice box, vocal cords, or the airway. These quickly-growing tumors are most common in very young children.

SYMPTOMS:

Symptoms can include hoarseness, coughing, difficulty breathing, and swallowing problems.

CAUSES:

This rare disease is caused by the human papillomavirus (HPV).

TREATMENTS:

Treatments may include antiviral therapy, antibiotic therapy, or surgical removal of the tumors. Sometimes the tumors return, requiring repeat surgery.

LARYNGOPHARYNGEAL REFLUX (LPR)

WHAT IT IS:

Gastroesophageal reflux disease (GERD) occurs when acid from the stomach backs up into the esophagus. When stomach contents reflux all the way up into the back of the throat and even the nasal airway, this is laryngopharyngeal reflux (LPR).

SYMPTOMS:

People with LPR sometimes describe a burning sensation, foreign body sensation, or bitter taste in the back of the throat. Other symptoms may include sore throat, excessive throat clearing, or voice changes. Although it's a result of reflux, many people with LPR don't experience heartburn.

CAUSES:

LPR is caused by reflux, but can be made worse or more likely from some other factors, including wearing very tight clothing, being overweight or obese, and dietary choices.

TREATMENTS:

To properly diagnose and treat LPR an ENT will complete a comprehensive examination, using including a laryngoscopy. In most instances, LPR can be improved or resolved with lifestyle changes that include:

- Avoiding eating or drinking within a few hours before bedtime
- Decreasing alcohol consumption
- Eating more slowly
- Losing weight
- Quitting smoking
- Wearing looser clothing

Dietary changes often include recommendations to avoid:

- Caffeine
- Carbonated drinks
- Chocolate
- Acidic foods, like citrus fruits and tomatoes
- Fatty and Fried foods
- Spicy foods

SALIVARY GLAND DISEASES AND DISORDERS

WHAT IT IS:

We have hundreds of salivary glands—in the mouth, along the lips, tongue, inner cheeks and palate, along with three pairs of major salivary glands, the parotid glands, submandibular glands, and the sublingual glands. Any of the salivary glands can develop problems, including cysts, stones, infection, inflammation, and tumors (benign or malignant).

SYMPTOMS:

There are many different kinds of salivary diseases and disorders, but the below symptoms may be a sign of a problem with the salivary glands:

- A lump under the tongue or in the cheek
- Pus draining into the mouth
- Difficulty swallowing, eating, or opening the mouth
- Difficulty speaking
- Swelling on both sides of the face
- Dry mouth
- Mouth sores or pain
- Bad taste in the mouth
- Pain in the face, mouth, or neck that gets worse during meals or before eating

CAUSES:

Salivary glands can develop problems resulting from many viruses, including the flu, mumps, coxsackievirus, HIV, herpes, or echovirus.

It's not entirely clear what causes salivary gland cancer, although exposure to radiation or certain carcinogens can increase risk.

Salivary stones can form from the crystallization of calcium and other substances, causing blockages to the salivary ducts. The causes for the formation of salivary stones aren't entirely known, but it's possible that risks increase with some factors including:

- Certain medications that decrease saliva production
- Dehydration
- Undereating, which decreases saliva production

Salivary gland infections can be the result of bacterial infections, including:

- Escherichia coli
- Haemophilus influenzae
- Staphylococcus aureus
- Streptococcus pyogenes
- Streptococcus viridans
- Streptococcus pyogenes

TREATMENTS:

It's important to seek a consultation with an ENT for symptoms of a salivary gland problem. For problems such as salivary stones, removal can usually be done with a simple outpatient procedure. For larger masses in the salivary glands, imaging tests or biopsy may be needed, followed by surgery. The renowned surgeons at C/V ENT Surgical Group are experts in the medical and surgical treatment of various salivary gland disorders.

TONSILLITIS

WHAT IT IS:

Tonsillitis is inflammation of the two oval-shaped pads—known as tonsils—on either side of the throat. It is most common in children and teenagers, but can affect adults too.

SYMPTOMS:

Symptoms of tonsillitis are often easy to recognize. They can include:

- Sore throat
- Visibly red, swollen tonsils
- White or yellow patches on the tonsils or throat
- Swollen glands in the neck
- Headache
- Fever
- Jaw or ear pain
- Stomach ache (more common in young children)

CAUSES:

Tonsillitis may have either a viral or bacterial cause, sometimes caused by group A streptococcus, which is the same bacteria responsible for strep throat.

TREATMENTS:

Most cases of acute or mild tonsillitis will resolve on their own, within a week to ten days and can be managed at home, using comfort measures such as over-the-counter medications and salt-water gargle. Cases caused by a bacterial infection may require antibiotics to resolve. For those who experience recurrent or chronic tonsillitis, long-term treatments or surgery may be needed.

IN CONCLUSION

There are a number of conditions that can affect the voice and throat, and many of them have similar symptoms. If you are experiencing sudden or chronic signs of a voice or throat disorder or illness, the best step is to seek the care of an expert ENT specialist.

*Keep in mind that some voice and throat symptoms may require immediate or EMERGENCY care.

Seek immediate medical care if you experience:

- Difficulty breathing
- Coughing up blood
- Difficulty swallowing
- Fever of 103°F or more, or fever for 3 days

Fortunately, many voice and throat problems can be very effectively managed through medical treatments and minimally invasive surgeries. The board-certified ENT physicians at C/V ENT Surgical Group offer sub-specialty expertise and cutting-edge surgical techniques to help our patients address a variety of voice and throat conditions.

ABOUT C/V ENT SURGICAL GROUP

At C/V ENT Surgical Group, we take pleasure in providing unparalleled care to all our patients. Our team of ENT specialists and surgeons are highly skilled, experienced, and qualified to carry out various treatments and procedures to help patients with these conditions. Each of our physicians specializes in various aspects, including ear, nose and throat disorders, making them one of LA's finest specialists. Using our cutting-edge technology and equipment, we treat our patients with the expertise and compassion they deserve. Contact us today for a consultation with one of our ENT specialists.



CONTACT C/V ENT SURGICAL GROUP

16661 Ventura Blvd, Suite 405
Encino, CA 91436
818-986-1200

7345 Medical Center Dr, Suite 510
West Hills, CA 91307
818-888-7878

info@cvsurgicalgroup.com | cvsurgicalgroup.com

