

ABSTRACT

PURPOSE: To analyse the clinical profile of hoarseness of voice and to find out the common etiological factors and associated pre disposing factors.

METHODS :

100 patients with hoarseness of voice were selected for the study based upon the inclusion and exclusion criteria. A thorough clinical history along with examination with indirect and video laryngoscopy, if necessary with direct laryngoscopy with /without biopsy were performed. Histo-pathological examination was performed for the needful.

DISCUSSION :

In our present study incidence of hoarseness voice was 0.27 % of total ENT cases. Maximum number of cases (31%) were in the age group of 41-50 years, among males common age groups was 41-50 years and among females is 31-40 years of age group.

Hoarseness was commonly found in labourer class (48%). Both among males and females this was commonest group. Lower socio economic group was commonly noted among patients (40.00%), also both in males and females.

Majority patients were from rural area (59%). Smoking was commonly encountered substance abuse among males (30.00%) and no substance abuse among females.

Along with hoarseness (100%) other symptom with which patient presented were dysphagia (25%), neck swelling (14%), dry cough (10%), foreign body sensation in throat (10%), stridor (5%) and Hemoptysis (5%).

Maximum number of patients presented with hoarseness of voice with duration of <1 month. On indirect laryngoscopic examination commonest finding was ulcero proliferative growth (33.33%). Indirect laryngoscopic examination done in 97% and video laryngoscopic examination in 41%.

Among 73% patients of histo-pathological studies, commonest finding was squamous cell carcinoma (45.2%). Laryngeal malignancy was the commonest cause of hoarseness of voice (33%) and males were commonly affected. Smoking was noted in all male patients with malignancy (80%), along with alcohol consumption in 70% and chewing tobacco preparation in 65% of cases.

Vocal cord nodules were found in 22% of patient and was the second most common disease with male to female ratio 1:2. Vocal cord palsy was found in 15% of cases and was common in females (29%). Chronic laryngitis and GERD was found in 10% and was found in 23% among males and 18% among females, with male to female ratio 1:1.

Tuberculosis was found in 8%, all cases were males, with pulmonary tuberculosis. Vocal cord papilloma presented in 5% of cases and females were commonly affected (66%) with male to female ration 1:2.

Vocal fold polyp was found in 3% of cases, each one in male (33%) and two in female (67%). Vocal cord cyst was presented in 2% of cases. Two cases (2%) presented with laryngeal trauma.

CONCLUSION: Thus from this study, we conclude that, the symptom of hoarseness of voice should never be ignored as it is the most common symptom in laryngeal malignancy. Any patient with hoarseness should be thoroughly investigated to rule out malignant conditions and conditions that might cause respiratory distress leading to life threatening complications.

KEYWORDS: Hoarseness of voice, laryngeal malignancy, indirect laryngoscopy, direct laryngoscopy, video laryngoscopy ,