## ELIZA TWEDDLE F.R.A.C.S

EAR, NOSE AND THROAT, HEAD AND NECK SURGEONS

## Spasmodic Dysphonia

Spasmodic Dysphonia, also known as Laryngeal Dystonia, is a neurological voice disorder involving involuntary spasms of the vocal cords, which cause interruptions to speech and affect voice quality. The cause of Spasmodic Dysphonia is unknown but is often triggered by stress or illness, affects more females than males and often presents around the age 40-50. People who suffer this condition find it emotionally draining and often find it hard to convey that it is a physical condition, mot a nervous one!

In most cases of Spasmodic Dysphonia there is an over contraction of the muscles that close the vocal cords, resulting in a tight, strained/strangled voice quality with intermittent breaks or stoppages. Often a great deal of effort is needed to speak and occasionally no sound is produced. In a smaller number of cases there is an over contraction of the muscles separating the vocal cords, resulting in a voice with breathy or whispery breaks. Symptoms may improve or disappear when laughing, singing or whispering. They may also vary during the day, become aggravated by certain speaking tasks, or increase during stressful situations.

Diagnosing Spasmodic Dysphonia is difficult since the choice can vary significantly and the symptoms can present very similarly to other conditions such as Voice Tremor or Muscular Tension Dysphonia (a very common voice problem). This can lead to increased frustration and anxiety in the person with the condition and delays in accessing effective treatment. Specialist multidisciplinary Voice Clinics use fiberoptic endoscopy of the larynx and vocal cords to aid in the differential diagnosis of this condition.

The treatment of choice, in most cases, is Botox (Botulinum Toxin). This involves local injections of Botox in the vocal cord muscles, which can provide significant (although temporary) relief from symptoms and marked improvement in voice quality. Botox acts by weakening the overactive muscles for approximately two to six months, after which further injections are needed throughout the person's life. Voice therapy in conjunction with Botox may prolong the improved voice quality. In some cases your treating ENT specialist may also discuss other medication or surgical options.

More information and support for patients and their families can be accessed through the VICTORIAN SPASMODIC DYSPHONIA SUPPORT SOCIETY, Speech Pathology Department at the Royal Victorian Eye and Ear Hospital (Ph. 03 9929 8223)