Hoarseness, or dysphonia, is said to occur when there is a change in the quality, volume or pitch of the voice.

Our vocal cords are like a pair of chopsticks that separate into a ‘V’-shape when we breathe. When we speak, the vocal cords come together, with the air squeezing between the cords, making them vibrate like guitar strings, thus producing voice. Men usually have thicker and longer vocal cords, giving them a lower-pitched voice than women.

Anything that prevents the proper meeting of the vocal cords, such as vocal nodules, swelling, or an abnormality of the laryngeal nerve or muscle, could cause hoarseness.

Causes of hoarseness
- Voice abuse — overuse, speaking too loudly and chronic cough
- Infection — such as laryngitis or upper respiratory tract infection
- Laryngopharyngeal reflux (LPR) — when stomach acid and contents are regurgitated up to reach the larynx
- Irritants — inhalation of substances, such as smoke, pollution, haze and allergens.
- Vocal nodules, cysts or polyps, which are more commonly found with vocal abuse or irritants
- Physical trauma to larynx
- Cancer of larynx — common in smokers, alcoholics and patients with human papillomavirus (HPV)
- Neurological conditions, such as stroke, or injury to the laryngeal nerve from cancer or trauma

When should you seek medical help?
Hoarseness that fails to resolve after three weeks with proper voice rest and free of irritants would require investigation.

How is the condition diagnosed?
A detailed medical history will often give a good indication as to the cause of the hoarseness. The gold standard test is examination using a miniature camera mounted on a fine flexible tube, enabling a very clear view of the entire nasal passages, larynx and oesophagus.

Treatment
- Treating and eliminating underlying causes
- Voice rest and humidified air
- Voice therapy by speech therapist
- Use of microphone, instead of shouting to an audience
- Surgery may be required to remove nodules, cysts, polyps or cancers

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