
Learning Objectives

MedBridge

Paradoxical Vocal Fold Motion/Vocal Cord Dysfunction Assessment

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Course Objectives:

Upon completion of this course, learners will be able to:

- Describe the theoretical bases for Irritable Larynx Syndrome
- Delineate the continuum of upper airway disorders
- Differentiate extrathoracic obstruction from behavioral upper airway disorders
- Provide demographics for upper airway disorders
- Provide speech language pathology assessment and behavioral intervention scaffold for paradoxical vocal fold motion
- Emphasize the complexity of assessment and treatment of upper airway disorders through case study approach

Chapter 1: Irritable Larynx Overview

This chapter will explain theoretical construct of the irritable larynx from the basic literature with a particular emphasis on the Nobel Prize winning research completed by Eric Kandel, Ph.D. This construct will be presented in a clinician-friendly manner to serve as a rationale to share with patients as they are counseled about the nature of their upper airway disorder. Many patients have been told that nothing is really wrong with them and that they should just be able to stop the behavior. This theoretical construct provides a compassionate approach to therapy that, while letting the client off the hook for the development of the disorder, provides a behavioral roadmap to overcome the behavior.

Chapter 2: Upper Airway Disorders Defined

This chapter will differentiate extrathoracic obstruction conditions from the upper airway disorders that are amenable to speech language pathology assessment and treatment. There are many obstructive conditions of the upper airway that may impact breathing or cause cough without affecting voice such as large vocal process granuloma, bilateral vocal fold paralysis, recurrent respiratory papillomatosis, subglottic or tracheal stenosis. The importance of ruling physically obstructing conditions that are not amenable to behavioral intervention is vital. Medical versus behavioral interventions for these conditions will be described.

Chapter 3: Assessment for Paradoxical Vocal Fold Motion

This chapter will define PVFM and describe demographics for this client population. The requisite medical work up for specific differential diagnostic conditions that should occur prior to the SLP referral will be outlined: pulmonary work-up, allergy work-up, otolaryngology work-up, etc. Typical referral sources will be outlined. The case history for PVFM will be covered in detail with specific guidance provided for common pitfalls and barriers that may occur during the

client interview. The complex nature of the breathing disorder requires excellent interviewing skills to discern the nature of the problem, the likely triggers for the disorder, relevant medical and behavioral history. Endoscopic assessment for this disorder will be described in detail. Counseling aspects for this population will be covered in detail.