



## Direct Laryngoscopy

Direct laryngoscopy is a frequently performed examination of the pharynx and larynx (throat and voice box area). It allows the surgeon to examine these structures thoroughly and take a biopsy from suspicious-looking tissue or remove a growth from a vocal cord that is affecting voice quality. While the patient is asleep, a special tool is inserted in the mouth to help look into the nooks and crannies of the back of the throat and voice box region. The surgeon may use a microscope and camera to help delicately remove a polyp, nodule or other growth from that area. Occasionally, a laser may be used to help remove tissue.

This procedure is generally safe and carries very few side effects; patients rarely experience a temporarily sore or numb tongue, gum or lip and, extremely rarely, a chipped tooth or dislodged crown.

Depending on what the surgeon identifies at the time of surgery, there is a chance that more treatment is necessary. You may require another operation if the original cause (voice abuse, smoking, acid reflux) has not been eliminated or if the nature of the problem is inherently recurrent (such as Recurrent Respiratory Papillomatosis). Occasionally, if the lesion involves a large area of both vocal cords, the operation is performed on different days to optimize healing and minimize unwanted scarring.

## Post-Operative Instructions & Information

After surgery on your vocal cords, it is important to rest your voice for a week. This means minimizing talking as much as possible and avoiding yelling and whispering, both of which put additional stress on the vocal cords. Dr. Litvack may also have you take an acid reflux medication during the post-operative period.