

Before Voice Surgery

We hope this information will answer some of the basic questions about what one can expect after vocal fold surgery.

VOICE REST

The vocal folds are delicate structures and after surgery, it is important to realize that they are still healing. Because placing sutures (stitches) in the vocal folds is difficult and could create scarring, they are not often used. To help things heal in the correct position, you will be placed on vocal rest to prevent excessive movement of the vocal folds while they heal. The period of time may be 48 hours to 7 complete days. Voice rest essentially means that you should not make any sounds unless there is in an emergency. This means **NO whistling, humming, singing, whispering, talking softly, talking on the phone, or “just talking for a second.”** This may or may not be coupled with taking corticosteroids to reduce swelling and acid reducers to prevent reflux from affecting the healing vocal folds.

Optimally, we have you begin voice rehabilitation with a Speech Pathologist on the same day as your first post-op visit (which is ideally one week after surgery).

For performers, you can certainly begin doing vocal exercises after the initial week, but healing is a process. We strongly recommend that you do not schedule a performance until we have cleared you to do so (this can take several weeks) and we all agree that you are fully functional again.

TONGUE SWELLING AND NUMBNESS

A metal scope is placed in the mouth to expose the vocal folds and allow surgeons to operate there. This scope rests on the tongue and between the teeth. As such it is possible to crack or chip teeth while placing and removing the scope. Also, pressure on the tongue can sometimes result in swelling of the tongue and/or a “funny bone” type injury to the nerves running in the tongue. You may need to see your dentists about damaged teeth. Tongue numbness, tingling, or swelling is almost always short-lived and typically resolved in 3-4 days if it happens at all. If you feel short of breath because of tongue swelling, it is best to go to the nearest emergency department for evaluation.

COUGHING

Your vocal folds first function is to protect the trachea (windpipe) and your lungs. As such, the reflex to cough and clear any foreign materials from your airway is very strong. When you have a procedure on your vocal folds, your brain may interpret the disturbance of the tissues and something foreign and stimulate coughing. During the surgery, it is likely that lidocaine (local anesthetic) will be sprayed on your vocal folds to help prevent cough. However, because this reflex is strong, it is sometimes hard to overcome. Please let your physician know if you continue to cough because excessive coughing can cause damage to the vocal folds.

CRACKED OR CHIPPED TEETH

As mentioned above, surgery on the vocal folds usually doesn't require an incision, but placing the metal laryngoscope might affect the teeth. This is particularly true if you already have loose teeth or teeth that have not been well maintained. Although we make every effort not to damage the teeth, it is possible that they may be cracked, chipped, or dislodged during the procedure. This is a rare complication, but will require management by your dentist or oral surgeon if it happens.

MEDICATIONS

Because each patient is unique, it is difficult to predict what medications may be prescribed for you during your recovery. However, commonly used medications include antibiotics, steroids, and acid-reducing medications called proton pump inhibitors. Keflex or cephalexin, Amoxicillin, and Clindamycin are common antibiotics. Decadron or Prednisone are the common steroids and Protonix, Nexium, or Prevacid are the commonly used proton-pump inhibitors.

Please review the medications you are already taking and assist your physician in determining if any bad drug interactions might occur. You can also check with your pharmacist when you fill the prescription. Please be sure to tell the pharmacist EVERYTHING you are taking. Also, please let your physician know about ALL medication allergies or ANY history of an adverse reaction to a medication. We can only anticipate problems and help maintain your safety if you give us complete information.

In general, we prefer that you not take aspirin or aspirin containing products, Coumadin, Plavix all of which interfere with normal clotting function and may make you more prone to having moderate to significant bleeding after surgery. Obviously if you



also have a clotting disorder the risk of bleeding is something we must assume. Antihistamines should be avoided if possible due to drying effects. The vocal folds always function better and heal better if they are not dry.

Typically, patients tolerate procedures on the vocal folds very well. Common complaints include mild sore throat, mild pain opening the jaw, and coughing. Many patients do not require pain relief beyond Tylenol. Ear popping and mild discomfort swallowing also may occur, but typically resolve in 3-5 days.

Please continue to communicate with the voice care team about what is going on during your recovery.