Epidemiological Aspects of Dysphonia in Tertiary Care Hospital

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Abstract

Objective: To find out the prevalence, etiology, risk factor, presentation and treatment option of the dysphonic people, facilitate the prevention of the risk factor of it. Study Design: Cohort retrospective study. Setting: Academic tertiary care medical center. Subjects and Methods: A total 1739 dysphonic patient's demographic data collected and analysed who attended in the department of Otolaryngology and Head-Neck Surgery, Comilla Medical College, and Comilla Medical Centre, Bangladesh. Results: Incidence of dysphonic patient was 1.16%, and yearly prevalence 33.33%. Out of 1739, the male was 1006 (57.85%), and the female was 733 (42.15%), 50-59 years were highest presentation 488 (28.06%). Among 1739, non-specific chronic laryngitis was 1015 (58.37%), dysphonia without structural change (MTD) 417 (23.98%), and malignancy 90 (5.17%). Off them, smoker was 911 (52.39%), voice abuser 469 (26.97%), industrial worker was 477 (27.43%), teacher 359 (20.64%), singer 151 (8.68%), and slum dweller was 528 (30.36%). Presenting feature revealed hoarse voice, reduced loudness, and tiring to talk above 90%. All patients assessed by rigid Hopkin's telescope. Non-neoplastic benign and suspected malignant lesion was 1503 (86.43), neoplastic benign and malignancy was 236 (13.57%), conservatively treated 1512 (86.43%), and surgically 227 (13.6%) treated by micro-laryngeal surgery. Conclusion: Dysphonia effect more than 33% of people at some point of life. It definitely influences the quality of life and losing the patient health and wealth. Early and effective treatment decreases the further loss.

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