

Welcome!

In this issue, we share a recording of our recent CME Webinar on hoarseness of voice that you might have missed, plus our responses to your unanswered questions. We also provide some history points on evaluating hoarseness and pearls on voice management. As we continue to improve our bulletin, appreciate if you can also share your feedback in a [brief survey](#) (*click to access FormSG*). Thank you!

❖ Foreword by Dr Charn Tze Choong, Head and Consultant, and Dr Christina Ng, Associate Consultant, Department of Otorhinolaryngology - Head and Neck Surgery, Sengkang General Hospital



Hoarseness of voice is a common complaint in primary healthcare settings. The diagnoses can range from a self-limiting acute laryngitis to more sinister etiologies, such as laryngeal malignancy. It is of paramount importance to sieve out the red flags and to refer these patients to an ENT doctor early for laryngoscopy. There are certain red flags to be assessed during history taking and physical examination. There are also many voice care tips that you can share with concerned patients who experience voice hoarseness.

With the recently conducted CME webinar themed “Hoarse Voice – When Should I Be Concerned?” as well as the accompanying articles in this issue of the GP eBulletin, we are certain that you will gain valuable insights and useful tips on the care of your patients with hoarseness of voice.

❖ SKH CME Webinar | Hoarse Voice – When Should I Be Concerned?

SKH held a GP CME webinar on 1 July 2022 featuring a panel led by SKH Otolaryngologists, Speech Therapist as well as a Primary Care Physician, who shared educational takeaways on voice problems with a focus on voice hoarseness and laryngeal cancer. **Missed the webinar or need a refresher?** Access the webinar by clicking [this link](#) (*Internet access required*).

PANELLISTS:



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Head & Consultant
Department of Otorhinolaryngology
- Head and Neck Surgery, SKH



[Dr Christina Ng](#)
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[Ms Bethea How](#)
 Speech Therapist
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- **1 CME point will be awarded to eligible GPs.**
- Doctors who attended the actual webinar will have points submitted by SKH on your behalf.
- Doctors who watch the recorded webinar in your own time can submit self-claims via SMC portal (under Cat 3A). Please contact [Ms Julian Ang \(Julian.ang.x.l@skh.com.sg\)](mailto:Julian.ang.x.l@skh.com.sg) to obtain the SMC-accredited and approved event ID for your Cat 3A self-claim.
- This webinar is part of a series of GP webinars. Details of the next webinar will be shared soon. Stay tuned!

Answers to questions from the recent CME webinar on Voice Hoarseness:



Voice Hoarseness

Your Questions Answered!

1. What are the treatments for acute laryngitis in GP settings? Can we prescribe steroids?

Answer from Dr Christina Ng: Acute laryngitis is usually self-limiting and resolves within 7-10 days, irrespective of treatment. Management includes self-care measures, such as voice rest, adequate hydration and steam inhalation. Oral steroids for presumed acute laryngitis is not recommended due to lack of supporting data of efficacy and risk of serious adverse effects. Antibiotics do not appear to be effective in treating acute laryngitis. Medications for symptom relief and secretion clearance, such as mucolytics, can be prescribed.

2. Does constant clearing of the throat damage the vocal cards?

Answer from Speech Therapist Bethea How: Yes, chronic throat clearing and coughing can damage the voice. When we throat clear or cough, our vocal folds come together forcefully. Repeating this behaviour can cause trauma to the vocal folds over time and lead to a hoarse-sounding voice. The urge to clear the throat is often due to irritation and mucus in the throat, and the underlying causes (such as acid reflux or post-nasal drip) will need to be addressed. A simple strategy to reduce throat clearing is to replace it by taking a sip of water and swallowing hard. Speech Therapists can help with the management of chronic cough by teaching techniques to help a person control and reduce this behaviour.

❖ Highlights

6 Key History Points to Evaluate Hoarseness of Voice

◆ The Hoarse Patient: 6 Key History Points



Dr Christina Ng
Associate Consultant

Hoarseness of voice is a common complaint among patients presenting in primary care. There are numerous possible causes, which can range from self-limiting benign causes to sinister causes that warrant further evaluation. The difficulty of diagnosis in primary care setting is the inability to examine the larynx. We highlight the important histories to narrow the differential diagnosis.



1. **Onset**

Acute hoarseness of voice accompanied by upper respiratory infection symptoms can be due to viral or bacterial laryngitis. Chronic hoarseness can be due to vocal abuse, reflux disease and neoplasm.

2. **Timing of Hoarseness**

If the patient's hoarseness is worst in the morning, it can be attributed to reflux disease. Other significant history to elicit will be presence of heartburn or globus sensation to suggest reflux disease. If the hoarseness is gradually worsening throughout the day, it can be due to voice abuse. Constant hoarseness will suggest vocal cord neoplasm.

3. **Voice Quality**

Voice quality can help to clue in the diagnosis. In rough or harsh voice quality, a possible diagnosis can be vocal cord neoplasm. In breathy or weak voice, possible diagnosis can be vocal cord paralysis. In patients who whisper with throat discomfort, possible diagnosis can be acute laryngitis.

4. **Medical History**

Medical history that can affect voice quality will be autoimmune disorders such as rheumatoid arthritis; inflammatory disorders such as amyloidosis or sarcoidosis; neurologic disorders such as myasthenia gravis; and reflux disease.

5. **Surgical History**

History of recent surgery requiring endotracheal tube insertion is important because hoarseness of voice can occur. This is usually self-limiting. Surgeries that can cause direct injury to recurrent laryngeal nerve such as thyroid/parathyroid surgery, carotid surgery, neck dissection surgery, mediastinal surgery or cervical spine surgery can cause vocal cord paralysis.

6. **Social History**

Teachers, public speakers, singers, and those who work in noisy environments are predisposed to voice abuse. Significant social history such as chronic smoking with worsening of hoarseness accompanied by throat pain or blood-stained sputum can be due to laryngeal cancer and should be referred to ENT early for laryngeal evaluation.

If you are interested to know more, please contact:

Dr Christina Ng

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Join the GPFirst Programme for Northeast Region



Dr Koh Shao Hui

**CONSULTANT, DEPARTMENT OF EMERGENCY MEDICINE. SKH
CLINICAL LEAD, SKH GPFIRST PROGRAMME**

Singapore has one of the highest rates of diabetes prevalence worldwide, with one in three Singaporeans being at risk of developing diabetes in their lifetime. This increase is especially evident when we look at diabetic-related attendances to SKH Emergency Department (ED).

A sizeable number present with recurrent infections and/or complications of organ injury, such as renal failure, ischaemic heart disease and strokes. Most of these patients have poorly controlled blood sugar levels, with a proportion having Diabetic

Ketoacidosis or Hyperosmolar Hyperglycaemic Syndrome as well.

As the cornerstone of primary care, our GPs play a crucial role in early detection of this condition, follow-up and right-siting of patients with complications to our ED and Specialist Outpatient Clinics.

I would like to encourage all GPs to sign up for our GPFirst programme which has helped to encourage more people to visit GPs for less severe conditions instead of heading to the ED.

GPFIRST
YOUR FAMILY DOCTOR. YOUR FIRST STOP

Patients referred by a participating GP to the SKH Emergency Department are eligible for a waiver of S\$50 off the ED attendance fee. They will also be accorded higher priority over other non-emergency cases when they arrive at the ED.

GPs also get access to our 24hr ED consultant hotline, GPFirst Whatsapp chat, and shared GP drive containing useful resources that you can refer to.



To find out more, contact Ms Ivy Goh at ivy.goh.y.h@skh.com.sg.



If you are interested to know more, please contact:

Ms Ivy Goh

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You may also visit <https://www.singhealth.com.sg/rhs/get-well/gpfirst/pages/for-gps.aspx> for more information.

❖ Services

Teleconsultation Services for Patients

SKH offer telemedicine services for the following clinical specialties and allied health services below. Lower teleconsultation fees for patients are valid till **31 Dec 2022** – see below! (**Note: Patient's eligibility for teleconsultations will be assessed after the first face-to-face consult with the SKH healthcare professional**)

Doctor Consultations	
<ul style="list-style-type: none">• Bariatric Surgery• Breast Surgery• Cardiology• Colorectal Surgery• Endocrinology & Diabetes• Gastroenterology• General Surgery• Geriatric Medicine• Haematology• Hepatobiliary Surgery• Infectious Diseases• Internal Medicine• Hand Surgery	<ul style="list-style-type: none">• Neurology• Neurosurgery• Orthopaedic Surgery• Otolaryngology (ENT)• Pain Management• Palliative Medicine• Psychiatry• Renal Medicine• Respiratory Medicine• Rheumatology• Sleep Medicine• Upper Gastrointestinal Surgery• Urology
Non-Doctor Consultations	
<ul style="list-style-type: none">• Preoperative Evaluation• Outpatient Cardiac Rehabilitation	<ul style="list-style-type: none">• Anti-Coagulation Clinic• Dietetics• Medical Social Services• Occupational Therapy• Psychology• Speech Therapy
<p>SKH patients also pay lower teleconsultation charges than face-to-face (F2F) consultation charges. Applicable for those with doctor consultations only.</p> <ul style="list-style-type: none">▪ Video Consult: Same rate as F2F consultation charges (20% discount* valid till 31 December 2022)▪ Phone Consult: 25% cheaper than F2F consultation charges <p>* VC discount of 20% is not applicable for non-residents.</p>	

PEARLS OF WISDOM



Betha How
Speech Therapist

MANAGING HOARSENESS

Hoarseness may be challenging to manage in the GP's room, especially if symptoms are prolonged or occur without obvious cause.

We highlight some common contributing factors to hoarseness, and suggest ways to advise your patients on managing their hoarseness.



IN CONCLUSION



Targeted info-counselling and speech therapy are valuable tools to help treat a hoarse voice.

Do refer your patients for further specialist management, if needed.

CONTRIBUTING FACTORS

ACID REFLUX

WAYS TO MANAGE HOARSENESS

In addition to medication, patients will benefit from **lifestyle and dietary advice** to reduce reflux. This includes minimising food and drinks, like caffeine, oily, fried and spicy foods, that promote reflux.

EVERYDAY ILLNESSES

Allergies, colds and the flu may cause inflammation in the larynx and increase secretions, leading to increased coughing or throat-clearing that are vocally traumatic.

Ensure adequate hydration: Encourage patients to drink 1.5 to 2 litres of fluids a day and eat 'moist' foods (e.g. soups, fruit). If a patient is on medication that causes dryness, such as antihistamines or decongestants, they should increase their water intake. Steam inhalation can also alleviate throat dryness. Taking over-the-counter lozenges that contain menthol or eucalyptus is not recommended for hoarseness.

VOCAL OVERUSE

Using the voice excessively may lead to vocal fatigue.

Check for vocal fatigue: If your patient is an occupational voice user (e.g. teacher, singer), advise them to pace their voice use by taking short vocal breaks throughout the day.

TRAUMATIC VOCAL BEHAVIOURS

Includes shouting, excessive coughing and throat-clearing, which may lead to vocal fatigue and injure the vocal folds.

Specialist treatment to learn good vocal technique: Patients who complain of vocal strain when speaking or singing may benefit from learning how to use their voices optimally. This will reduce the risk of injury to the larynx and vocal folds when speaking. A speech therapist can teach voice techniques to help balance an individual's breathing, phonation and resonance to achieve their best voice.

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If you have any questions or wish to provide feedback, please email Julian.ang.x.l@skh.com.sg
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