Glucocorticoids for Laryngeal Disease: A Survey of Otolaryngologists

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ABSTRACT

Objective: Glucocorticoids (GCs) are commonly utilized in the treatment of laryngeal disorders despite the absence of clear guidelines regarding their use. We utilized a web-based survey to assess current practice patterns regarding GC use for various laryngeal conditions, to identify factors influencing GC selection, and to determine GC strength and route of administration in specific laryngeal disease.

Methods: A web-based 20-question survey (Section 1: demographics; Section 2: questions regarding clinical decision-making when prescribing GCs; Section 3: questions evaluating the survey respondents’ knowledge of GCs) was developed using a commercially-available database. Results of 312 respondents (69% reported glucocorticoids to be valuable in their practice) were analyzed.

RESULTS

Survey Methods. An internet survey was designed based on a review of the literature as well as expert consensus from several otolaryngologists. Sections 1 and 2 were designed to gather subjective factors such as previous experience and familiarity to drive treatment decisions rather than more objective factors such as academic literature and empirical data. Also, the minimal specificity of the current literature that is available and the lack of evidence-based literature discussing the use of glucocorticoids for angioedema of the larynx, croup, allergic laryngitis, acute laryngitis, and rheumatologic laryngeal lesions. However, for the other categories of laryngeal disease, the majority of respondents felt that GCs 'always' or 'often' improved outcomes in the treatment of vocal fold pathology. For benign laryngeal disorders of the larynx, and highlight an important potential area for future studies.

CONCLUSIONS

The current study presents results from a internet-distributed survey of otolaryngologists and indicates that many of the commonly held beliefs and opinions regarding the efficacy and optimal route of administration of GCs for many laryngeal diseases. Although recent studies have begun to show promise in local injection of GCs for many laryngeal diseases, these practices have not gained widespread acceptance, perhaps due to the technical skill required for this technique. Prospective, randomized studies evaluating the GC use in laryngeal disorders may help establish better guidelines for GC therapy.

REFERENCES


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DISCUSSION

The results of this study show significant variability in GC prescription patterns among otolaryngologists. There seems to be clinical consensus on the use of GCs for treatment of certain diseases such as angioedema and angioedema, however, for other vocal pathologies, the use of GCs is less clear. These observations indicate the need for further studies in this area. A major limitation of this study is the low response rate, which may affect the generalizability of the findings. The data suggests that many otolaryngologists have not adopted the use of direct laryngeal injection for the treatment of benign vocal fold pathology.

One reason behind these prescription practices may be the use of subjective factors such as previous experience and knowledge of case studies rather than objective factors such as academic literature and empirical data. The minimal specificity of the current literature that is available and the lack of evidence-based literature discussing the use of glucocorticoids for angioedema of the larynx, croup, allergic laryngitis, acute laryngitis, and rheumatologic laryngeal lesions. However, for the other categories of laryngeal disease, the majority of respondents felt that GCs ‘always’ or ‘often’ improved outcomes in the treatment of vocal fold pathology. For benign laryngeal disorders of the larynx, and highlight an important potential area for future studies.

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In laryngeal, the role of glucocorticoids in treating diseases such as circular, laryngeal stenosis, and aspiration is well-established. However, there is a lack of consensus regarding the use of GCs for other laryngeal pathologies. This was evident in the literature review, which found vague, confusing, and sometimes altogether absent recommendations regarding GC use that may not be reflective of current clinical decision-making. The majority of respondents felt that GCs ‘always’ or ‘often’ improved outcomes in the treatment of vocal fold pathology, and the most common reasons for choosing GCs included improvement in the treatment of vocal fold granulomata and Reinke’s edema, but still favored no role for GCs (Figure 4).

In contrast, however, there is a lack of evidence-based literature discussing the use of glucocorticoids for angioedema of the larynx, croup, allergic laryngitis, acute laryngitis, and rheumatologic laryngeal lesions. However, for the other categories of laryngeal disease, the majority of respondents felt that GCs ‘always’ or ‘often’ improved outcomes in the treatment of vocal fold pathology. For benign laryngeal disorders of the larynx, and highlight an important potential area for future studies.

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