

Anatomie des risques vocaux de la thyroïdectomie

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Causes possibles de dysphonie après thyroïdectomie

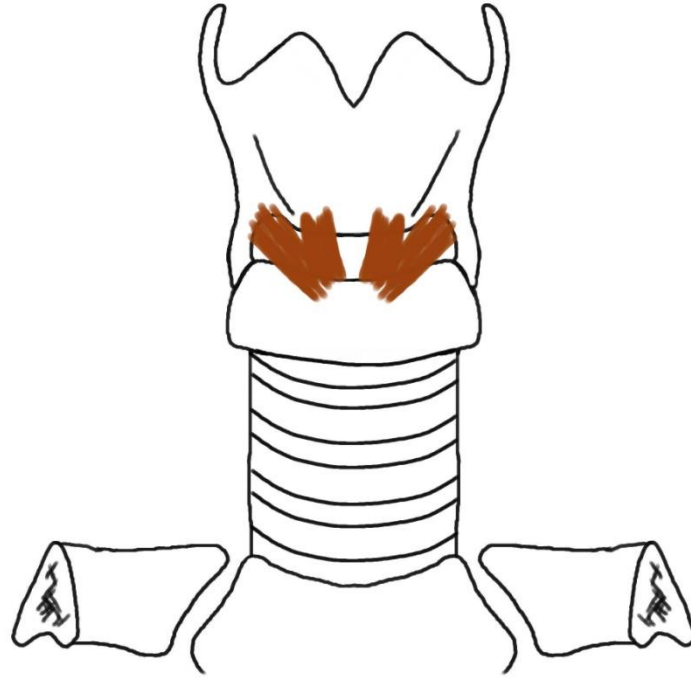
- Causes neurogènes
 - Lésions du nerf laryngé récurrent
 - Lésions de la branche externe du nerf laryngé supérieur
 - Etude prospective sur 250 patients (PhD L. Lejeune, en cours)
 - 14 RLN (5,6%), aucune permanente dans la série (autour de 1% dans la littérature)
 - 12 SLN (4,8%)



Soit 10% environ de lésions neurogènes

Causes possibles de dysphonie après thyroïdectomie

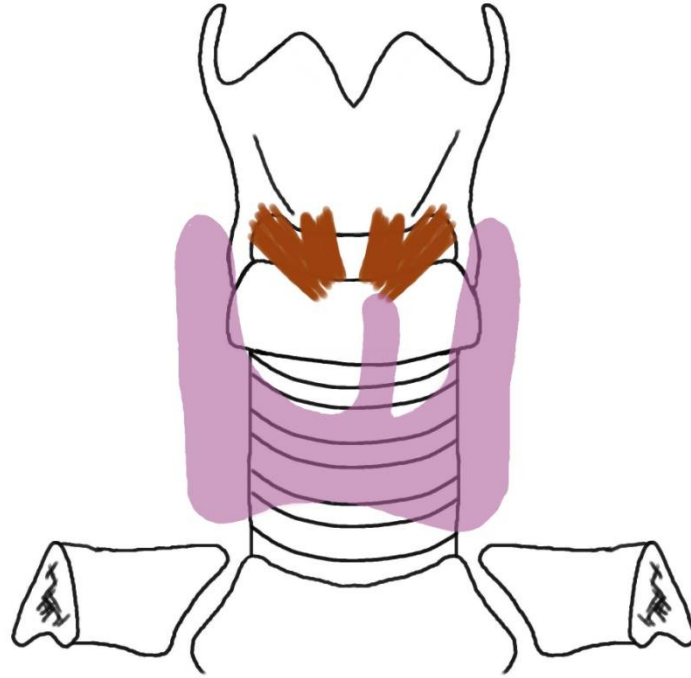
- Autres causes
 - Traumatisme post-intubation
 - 31,3% de lésion cordales(Echternach 2009)
 - Hypothyroïdie (Birkent 2008)
 - Mais présence de biais dans l'étude
 - Reflux pharyngo-laryngé (Scerrino 2012, Cusimano 2014)
 - Lésions directes des muscles
 - Infections virales intercurrentes
 - Asthénie post-opératoire
 - Facteurs psychologiques



Haut

Gauche

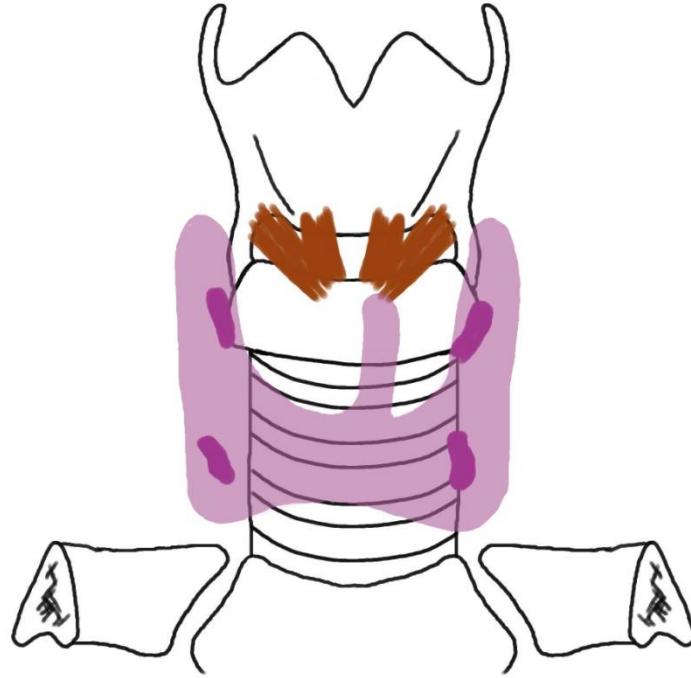




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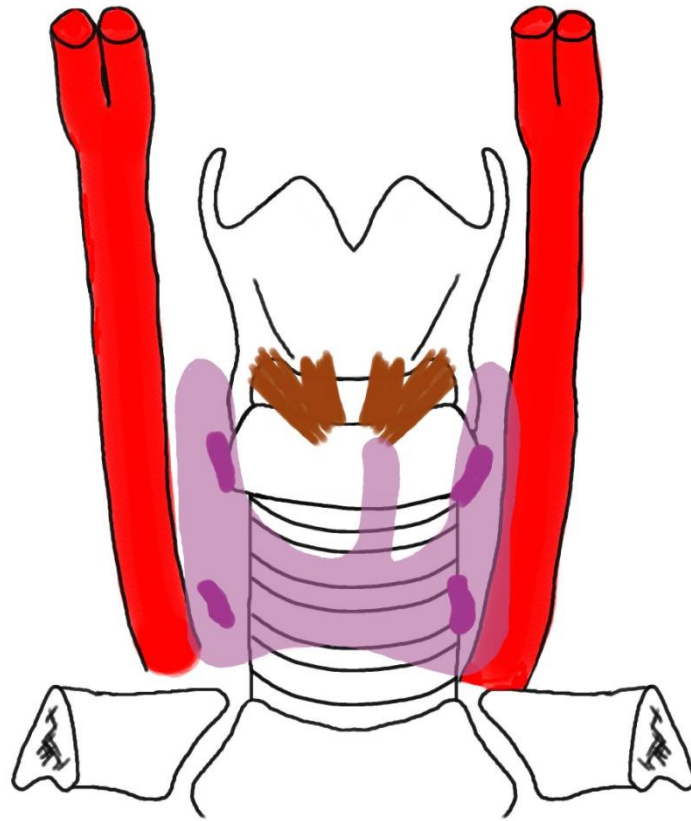




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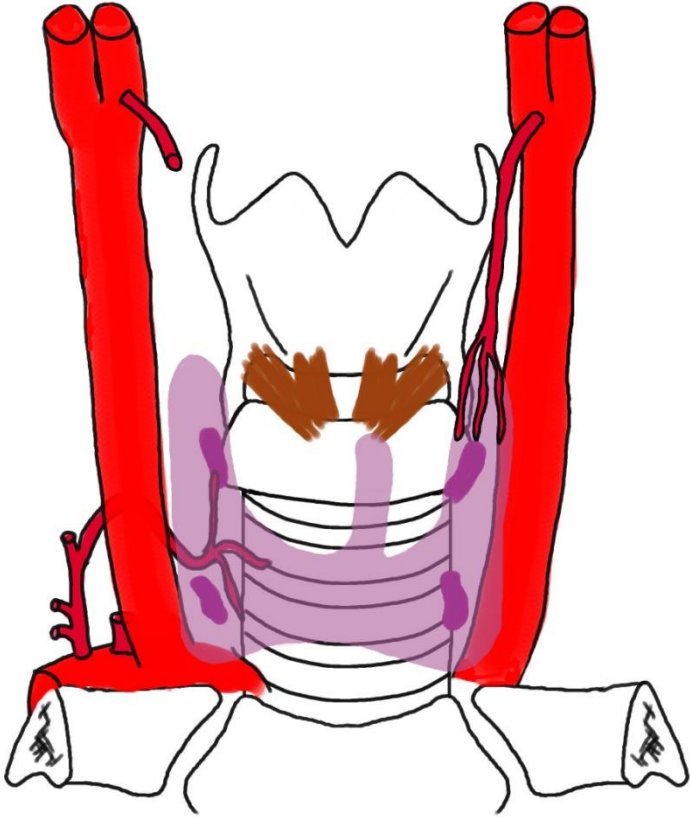




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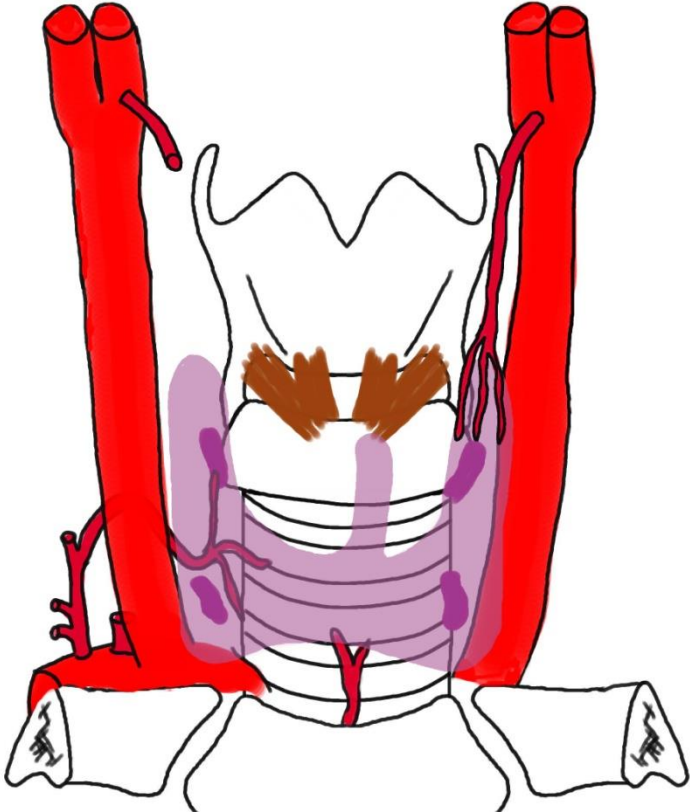




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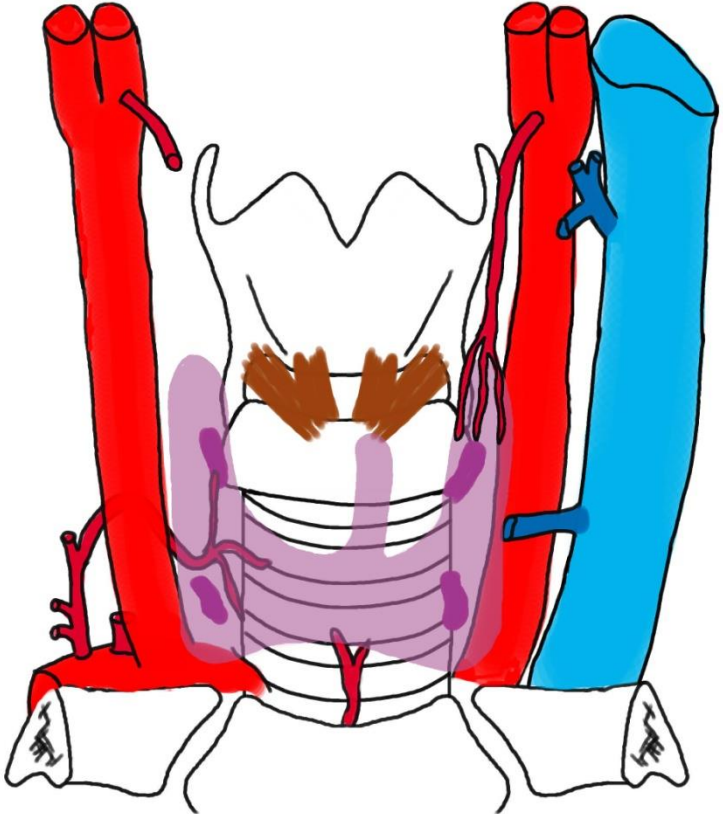




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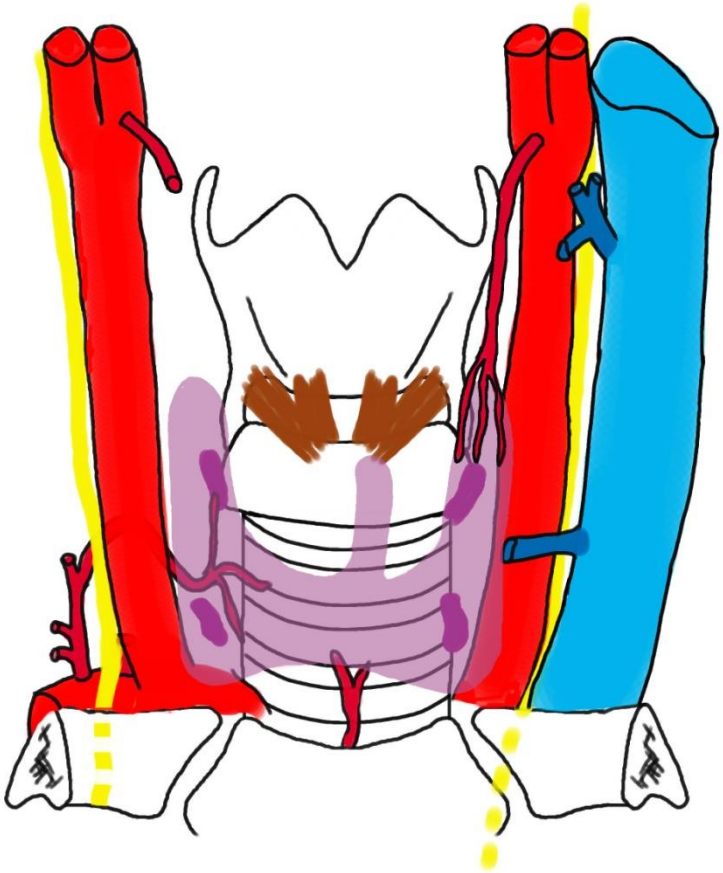




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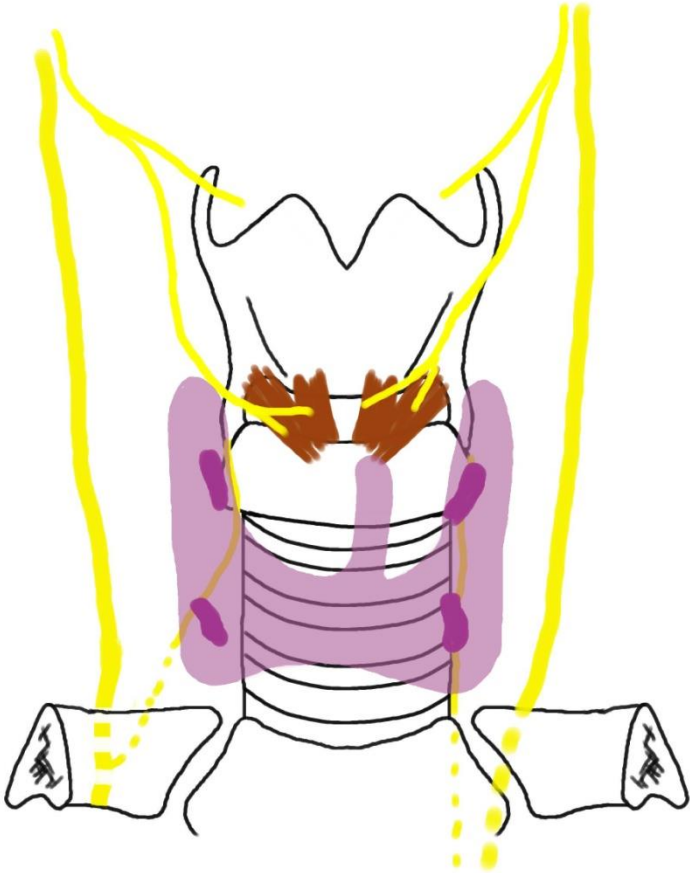




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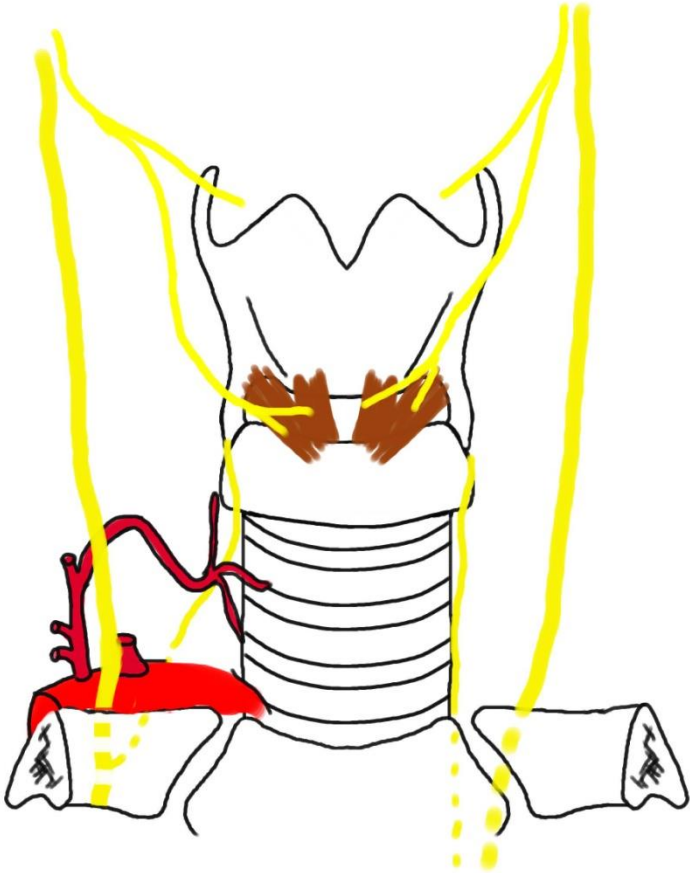




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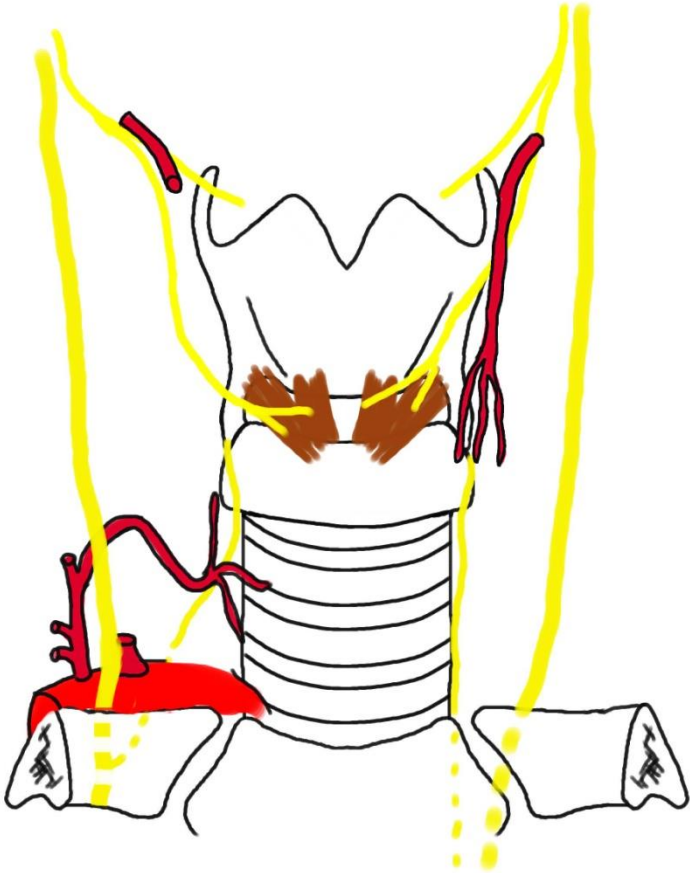




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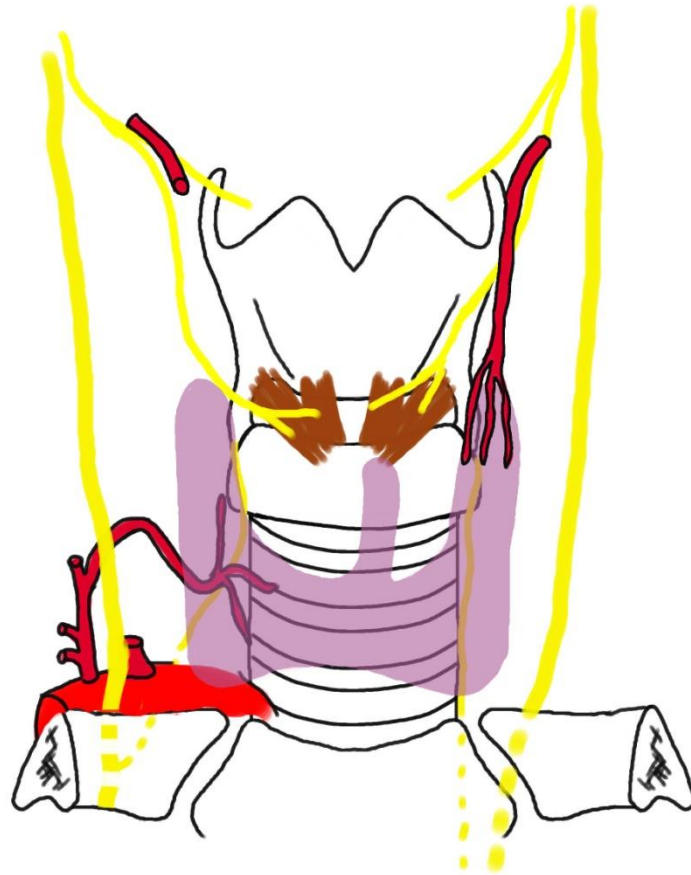
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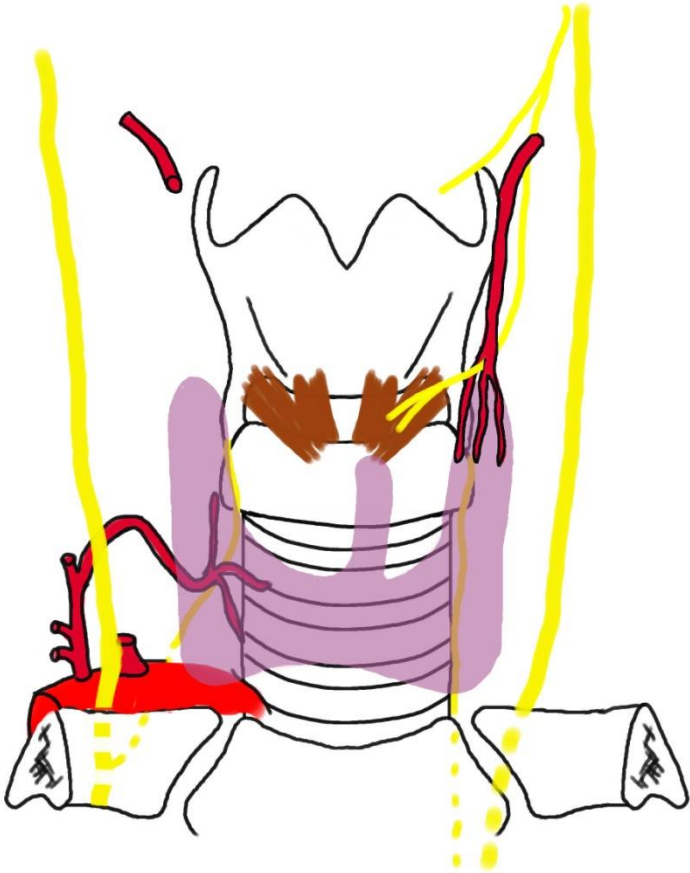
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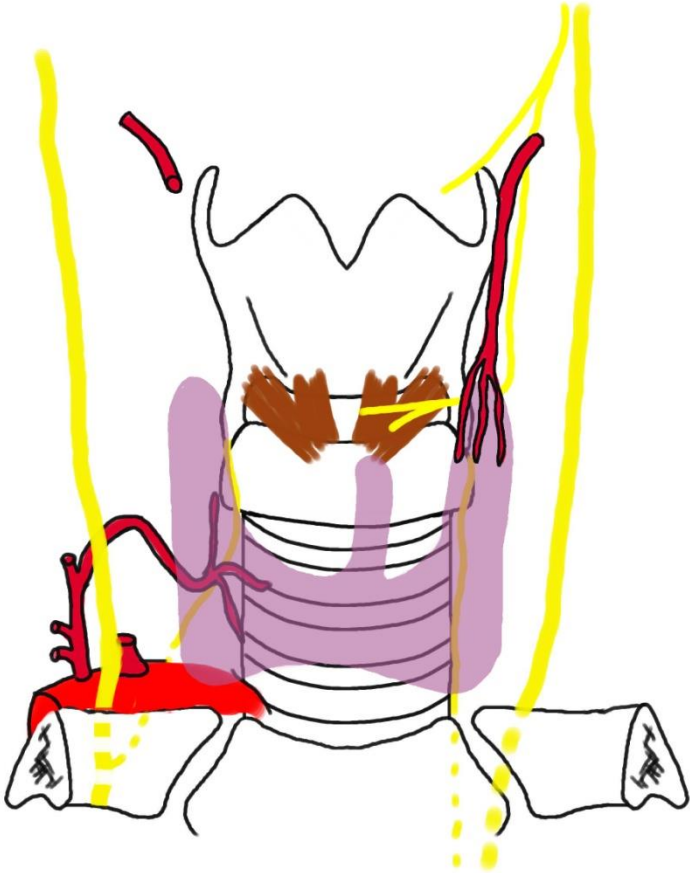
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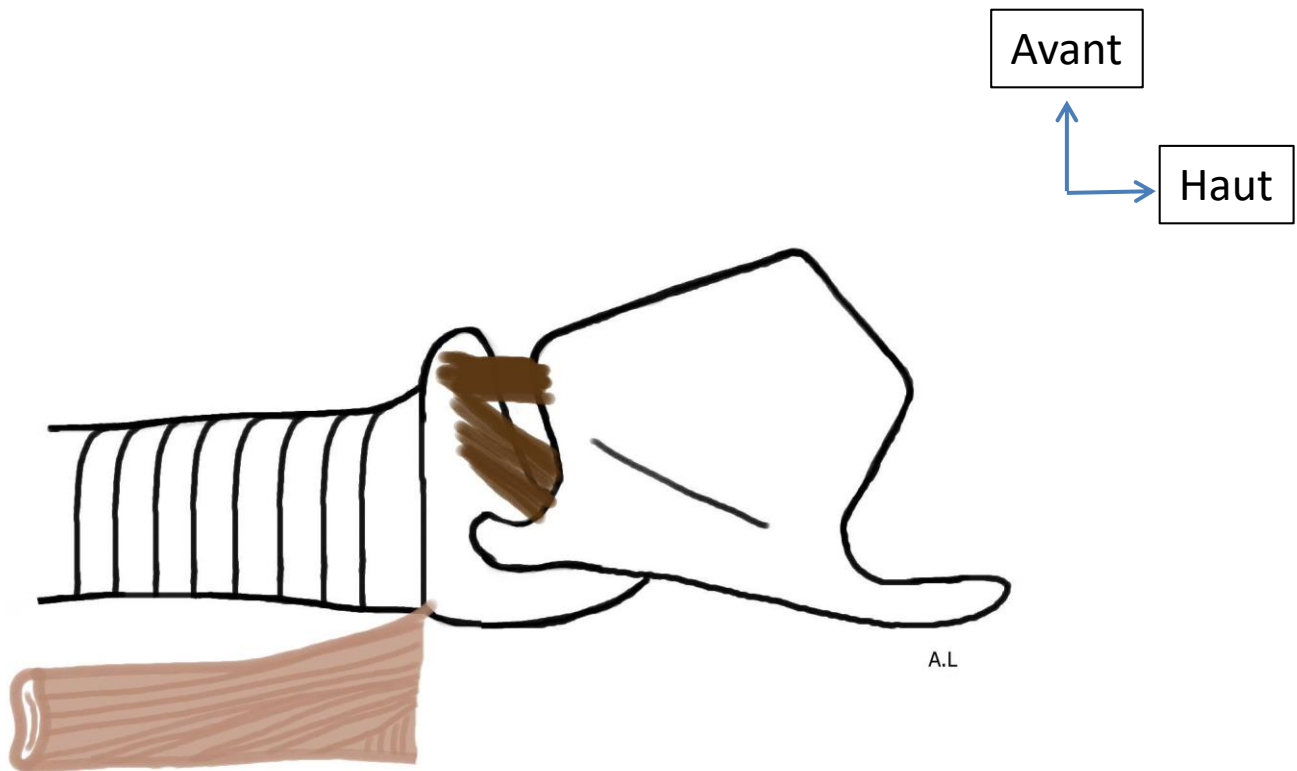


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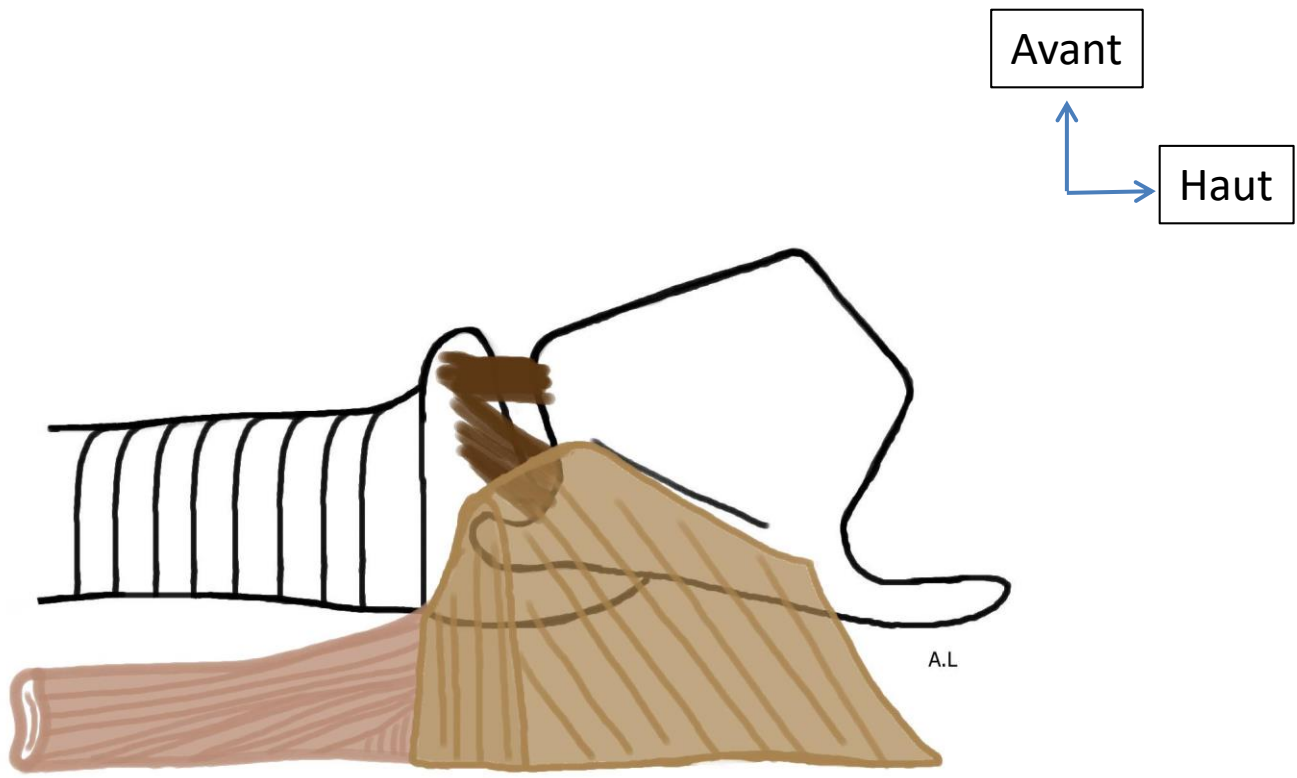
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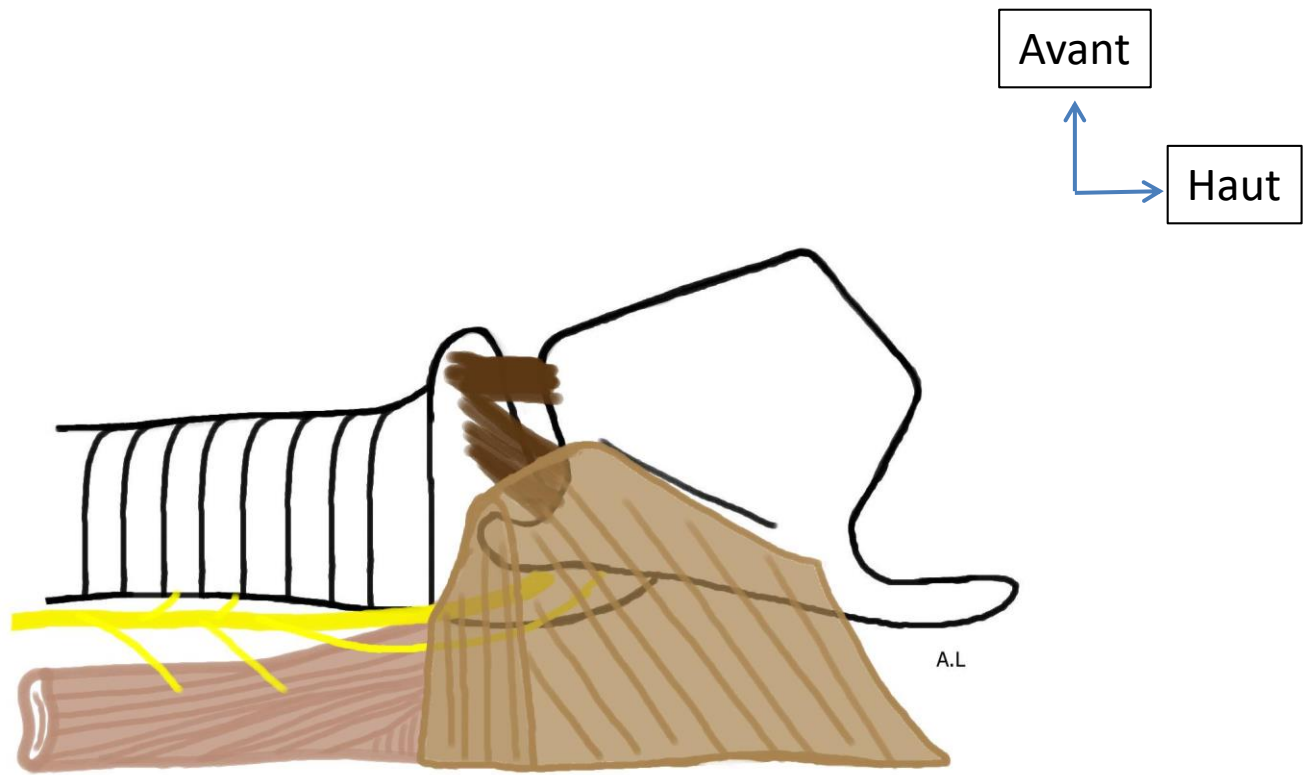


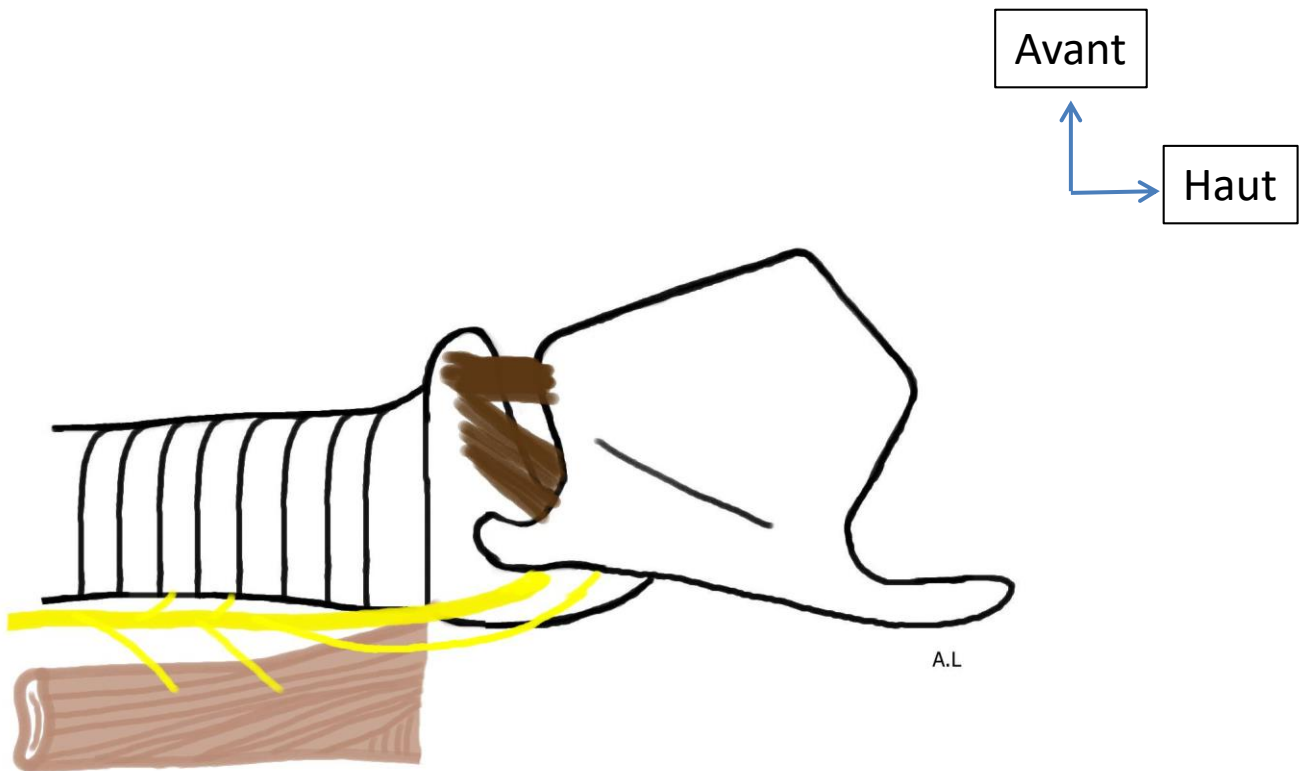
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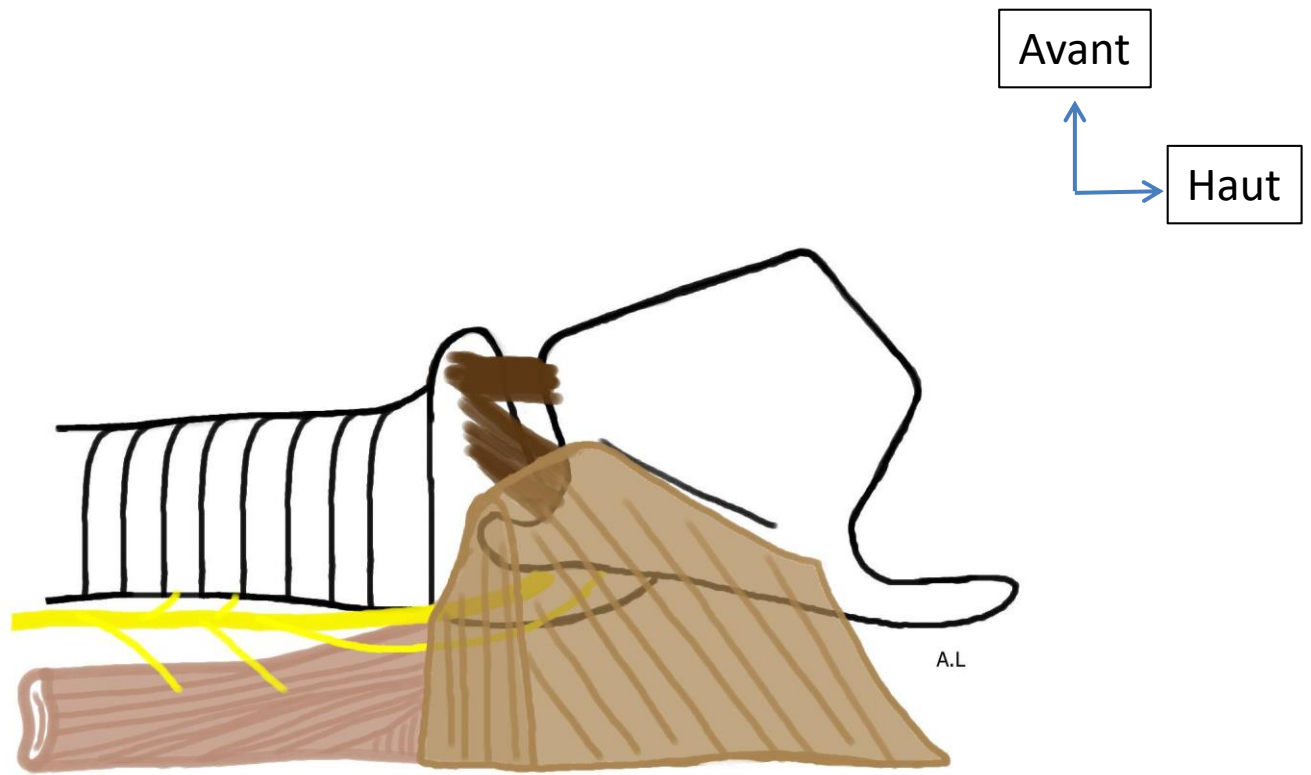
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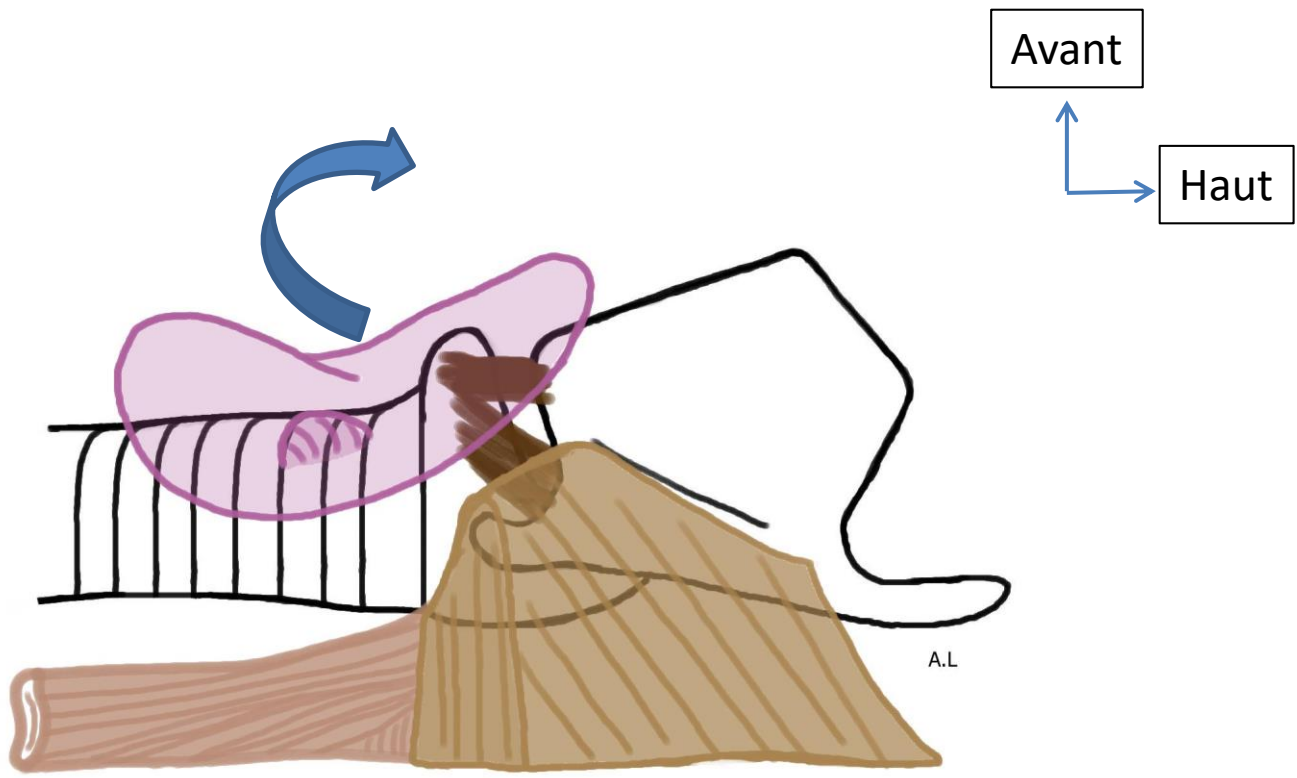


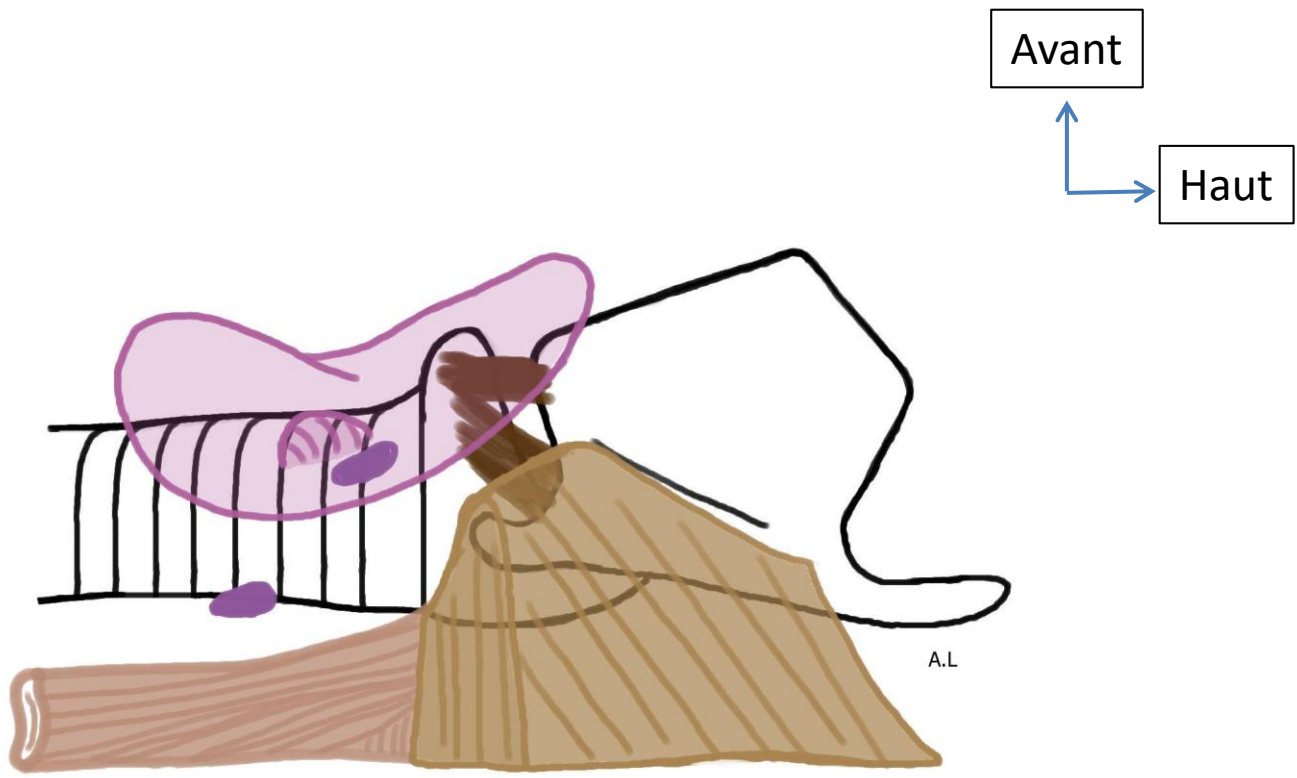
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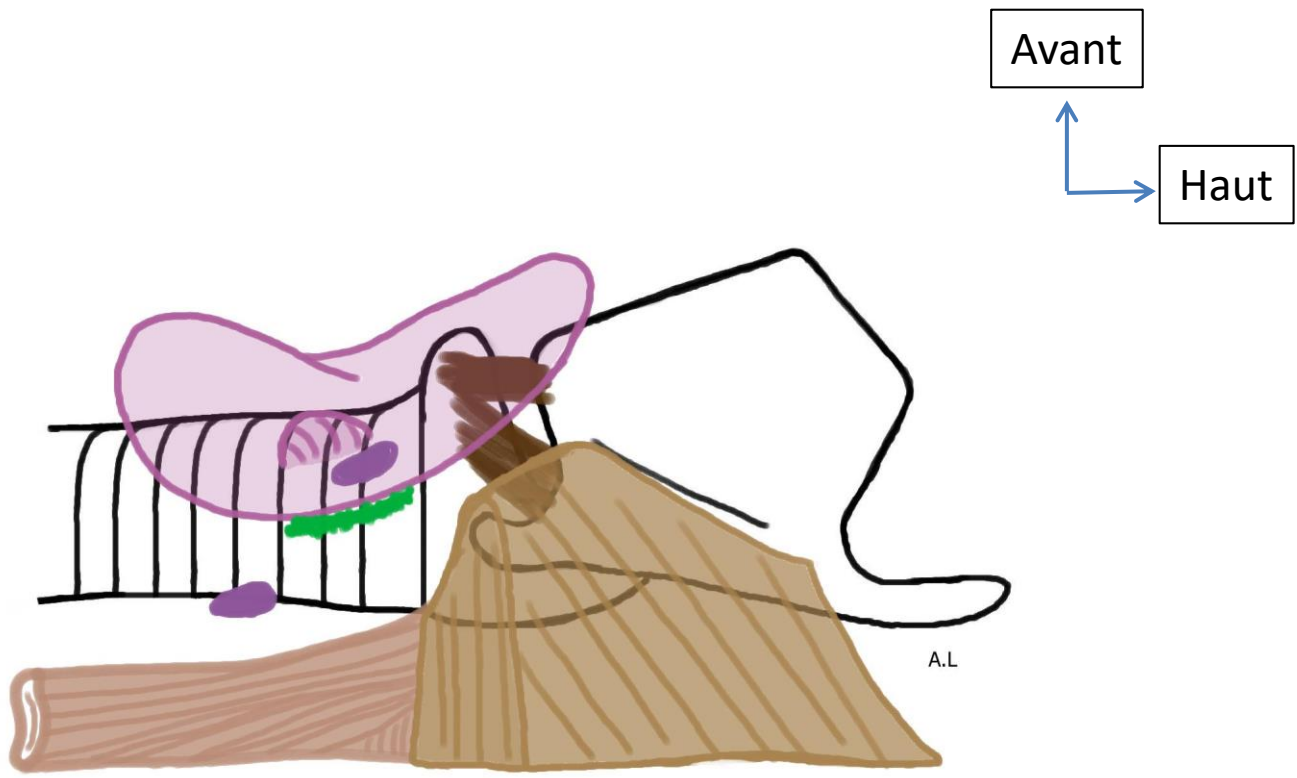








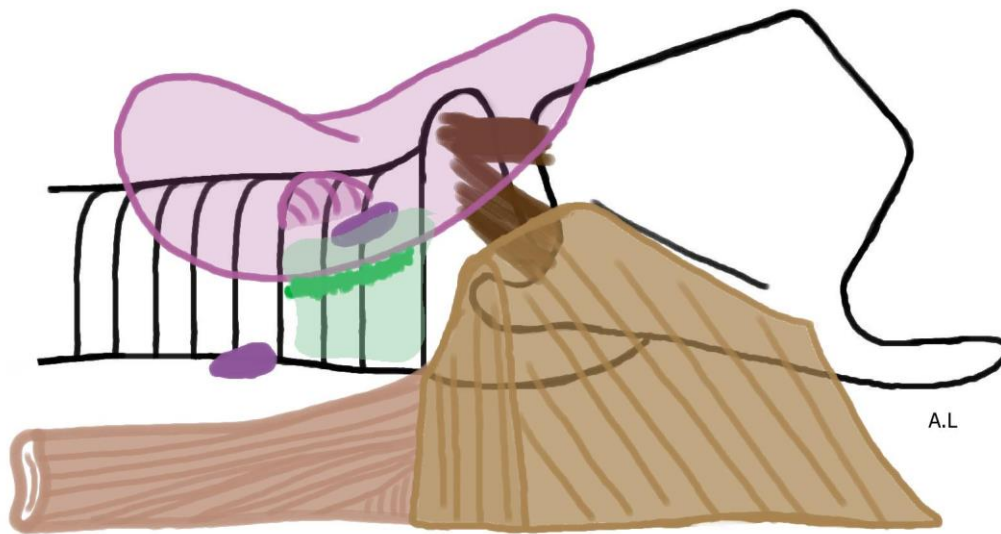




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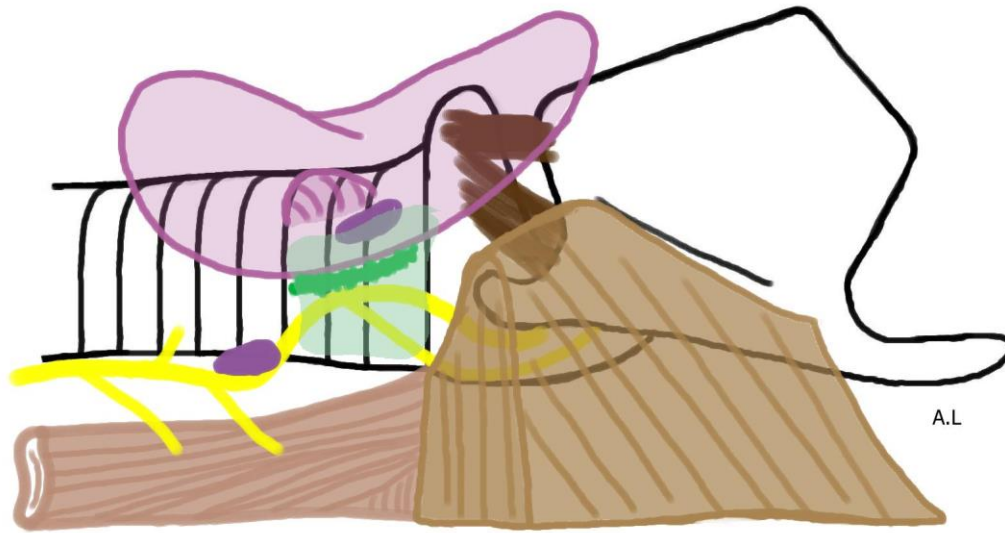
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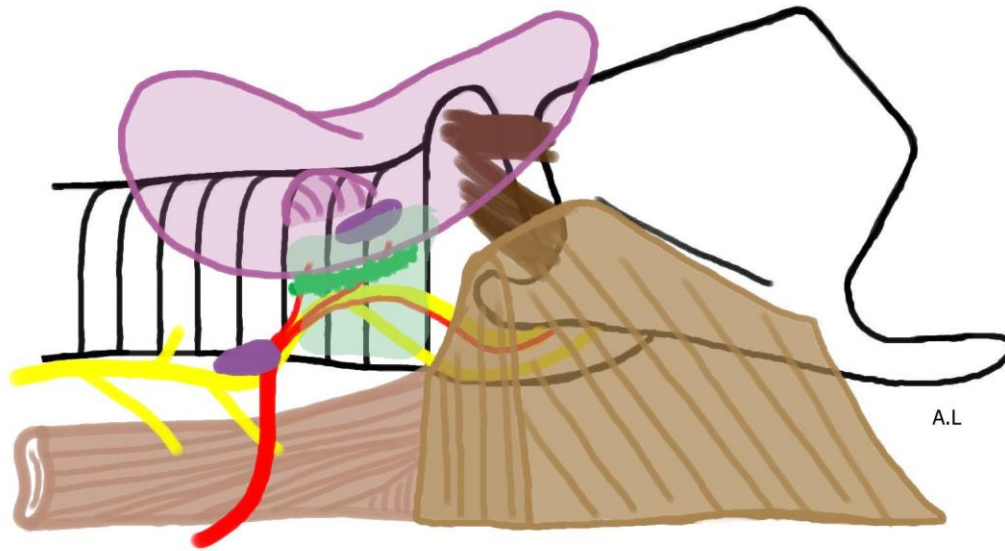
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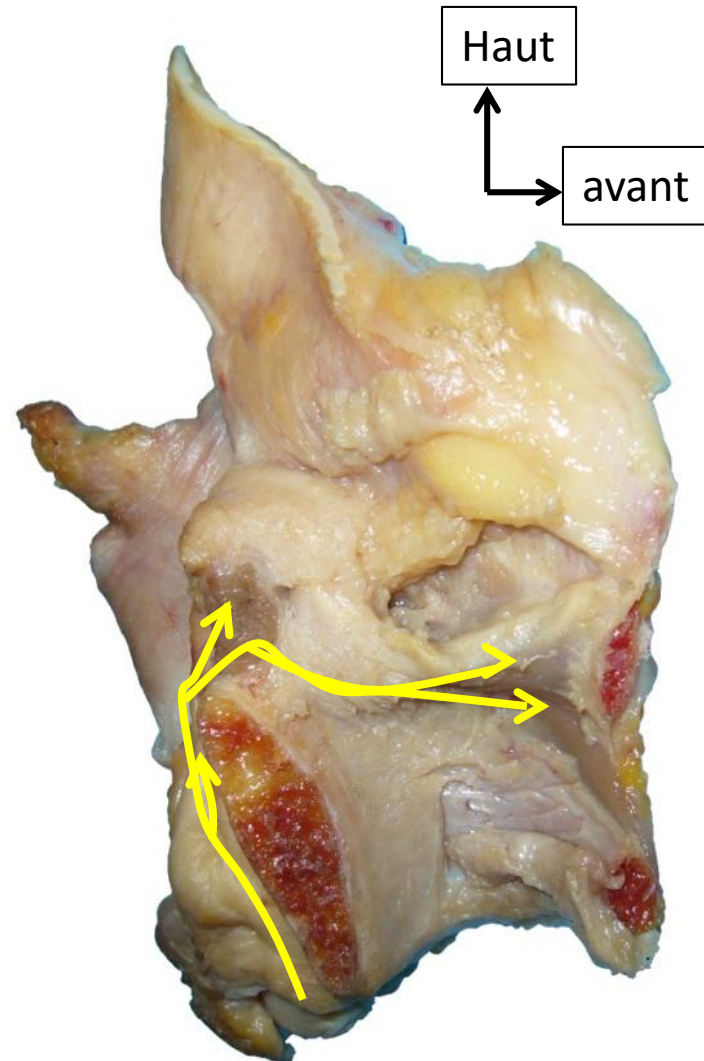
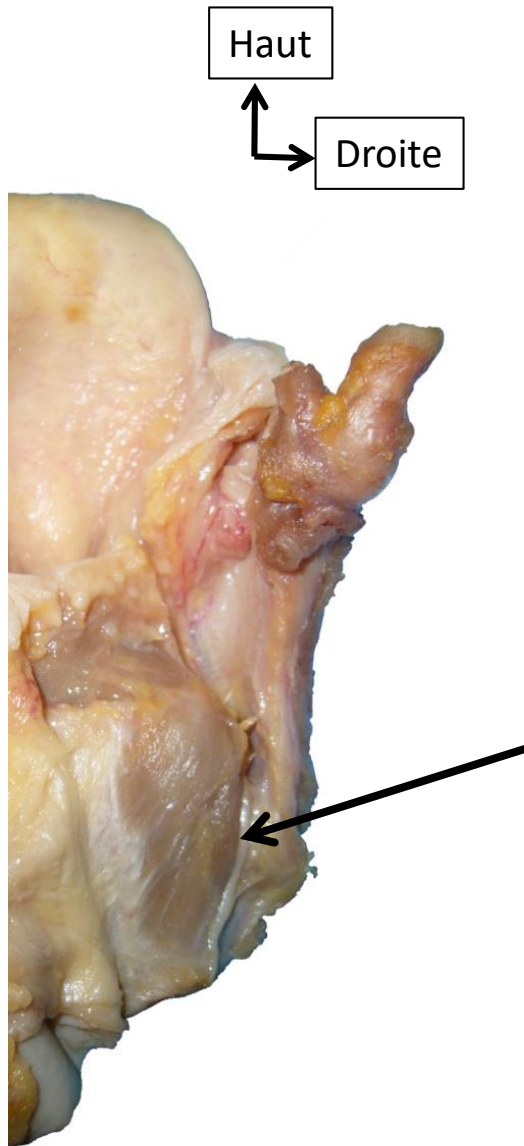


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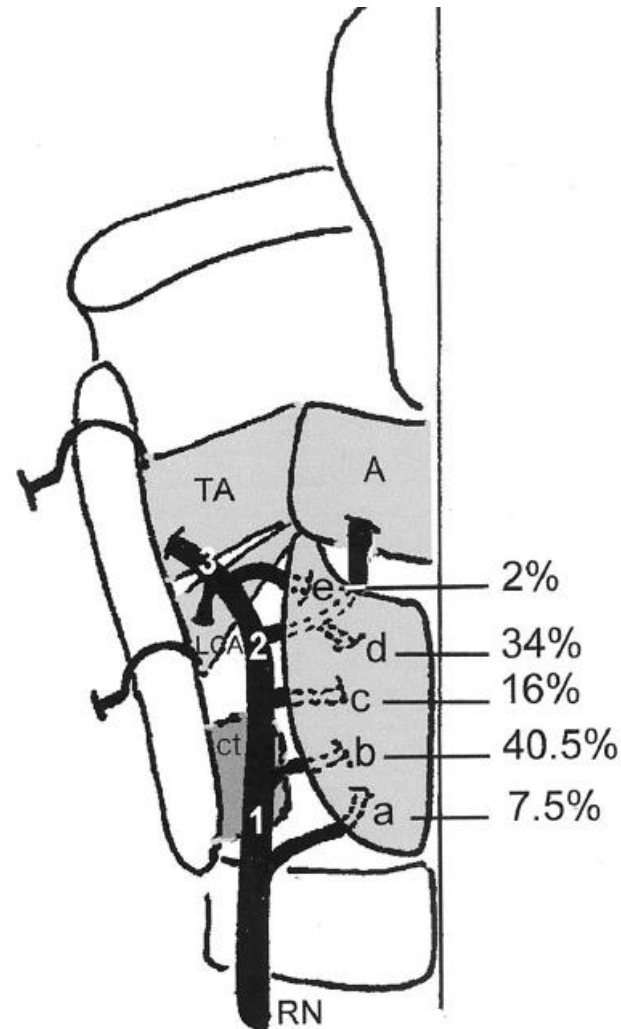
Terminaison du nerf laryngé inférieur



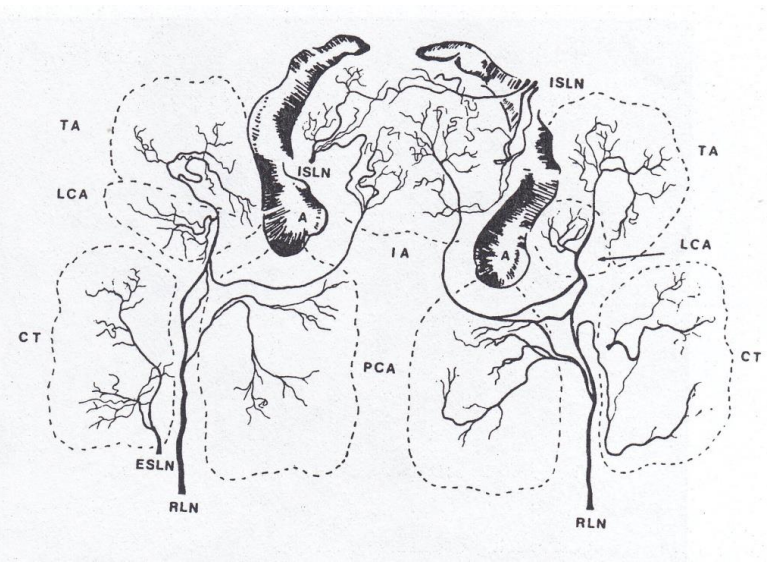
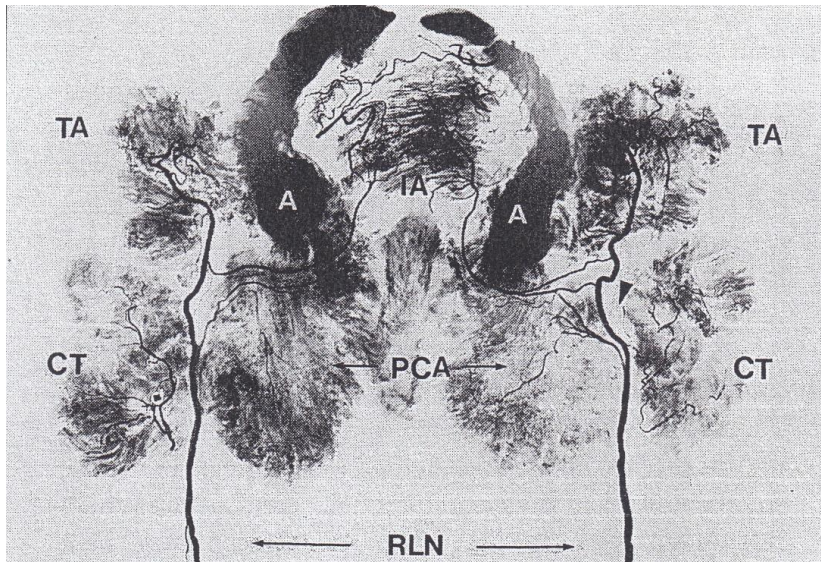
Variabilité des rameaux terminaux

- Nombre de branches

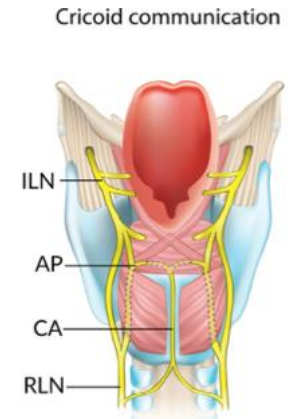
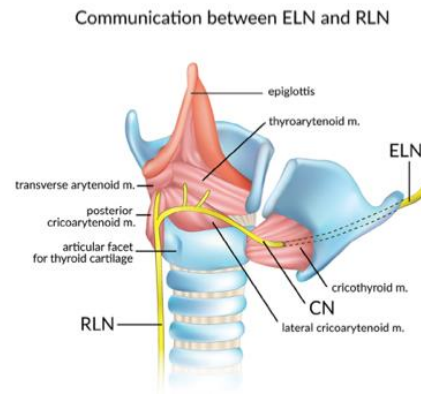
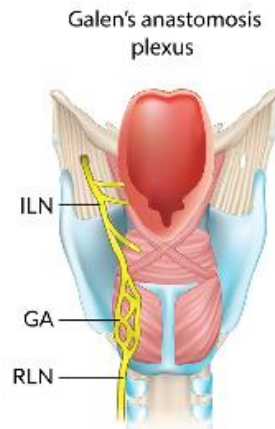
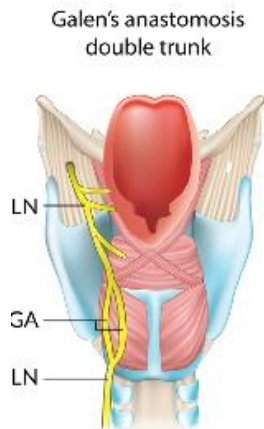
- 1 branche=7.3%
- 2 branches=42.7%
- 3 branches=34%
- 4 branches=10.7%
- 5 branches=4.7%
- 6 branches: 0.6%



Communications entre NLS et NLI



D'après Sanders I et al., 1993



D'après Henry BM et al., 2017

Merci pour votre attention!

