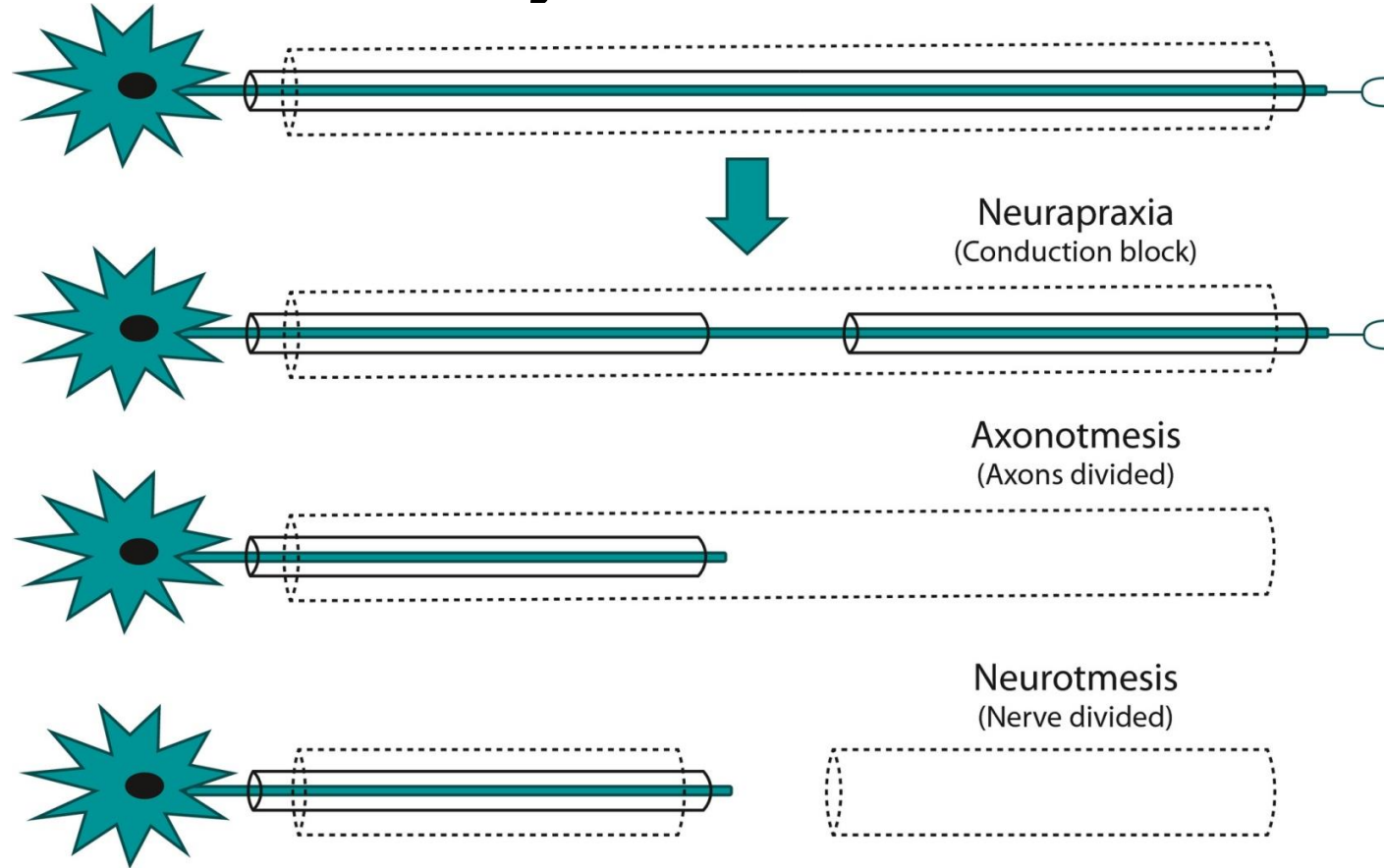


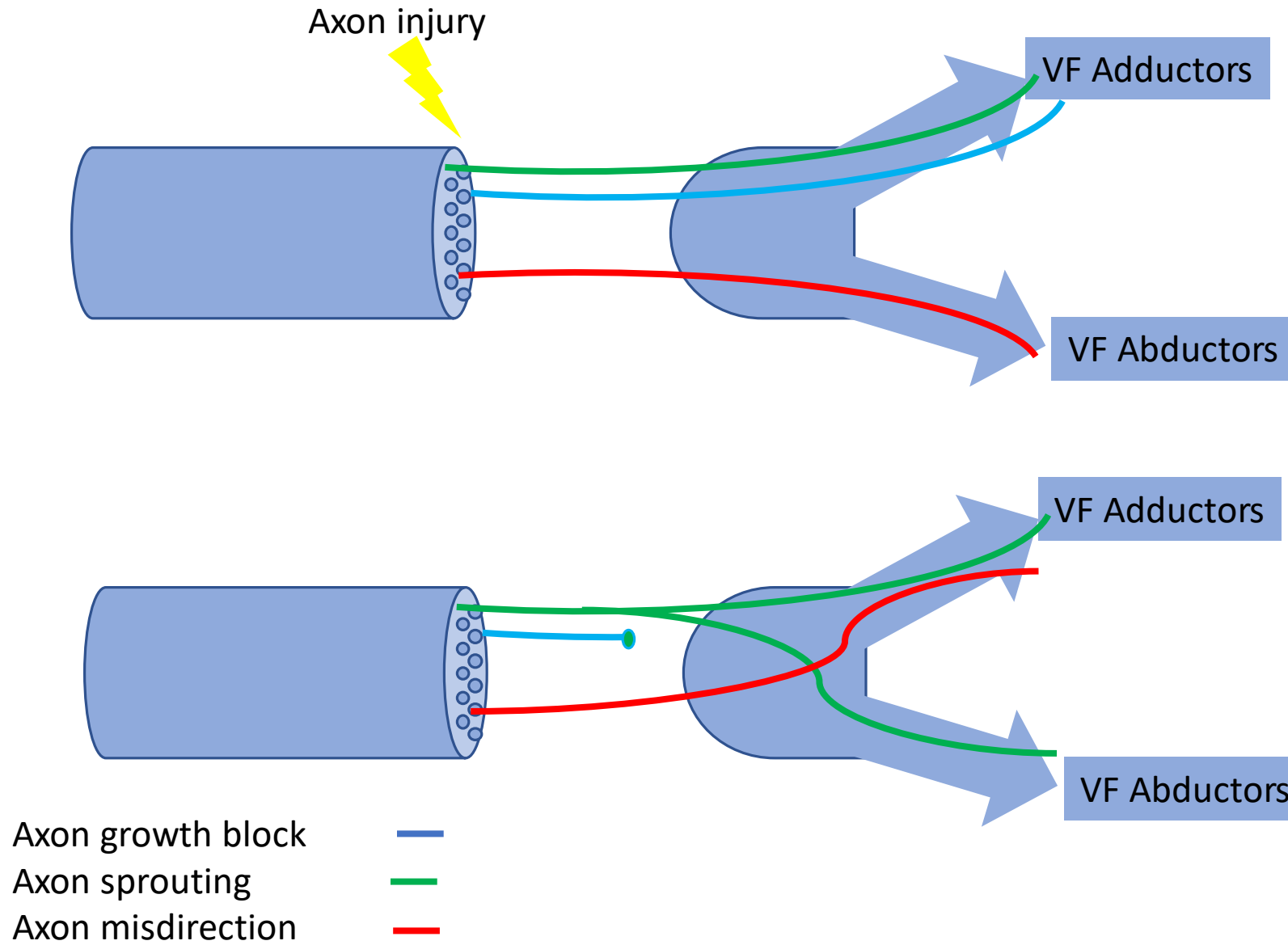
UVFP as an evolutive Process and Decision-Making

Severity of nerve injuries



Milder injury-> faster and more physiologic recovery

Nerve recovery after axonal injury: basis of synkinesis



Laryngeal synkinesis

- Voice recovery is not mobility recovery
 - Laryngeal synkinesis (R. Crumley)
 - Type I: good voice
 - Type II: involuntary twitches and poor voice
 - Type III: adduction during inspiration
 - Type IV: abduction during phonation
- EMG synkinesis rate is often lower in TA than in PCA,
- EMG synkinesis rate highest (TA and PCA) in Crumley type I

[Crumley's Classification of Laryngeal Synkinesis: A Comparison of Laryngoscopy and Electromyography.](#) Foerster G, Podema R, Guntinas-Lichius O, Crumley RL, Mueller AH. Laryngoscope. 2020 Nov 21. doi: 10.1002/lary.29275

[Laryngeal synkinesis revisited.](#) Crumley RL. Ann Otol Rhinol Laryngol. 2000 Apr;109(4):365-71. doi: 10.1177/000348940010900405

Iatrogenic UVFP and timeline

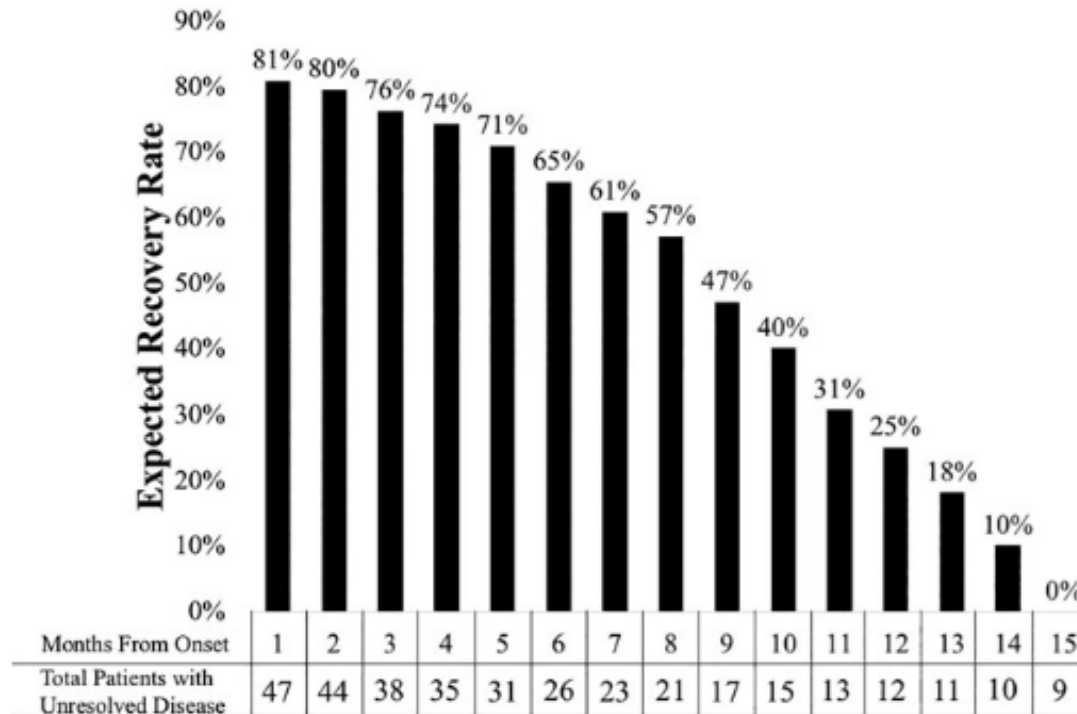


Fig. 4. Proportion of iatrogenic vocal fold paralysis patients who will recover, according to month from onset, shown as a percentage of the total number of patients who still have not recovered at X number of months. The total number of patients with unresolved disease decreases each month as patients who recover are eliminated from the pool. This number is shown below the graph. The percentages shown reflect the patients who will eventually recover but have not yet over the total number of patients still with unresolved disease at that time point.

- Percentages of voice recovery as function of time since the onset

[Time Course of Recovery of Iatrogenic Vocal Fold Paralysis.](#)

Husain S, Sadoughi B, Mor N, Sulica L. Laryngoscope. 2019 May;129(5):1159-1163. doi: 10.1002/lary.27572.

Idiopathic UVFP and timeline

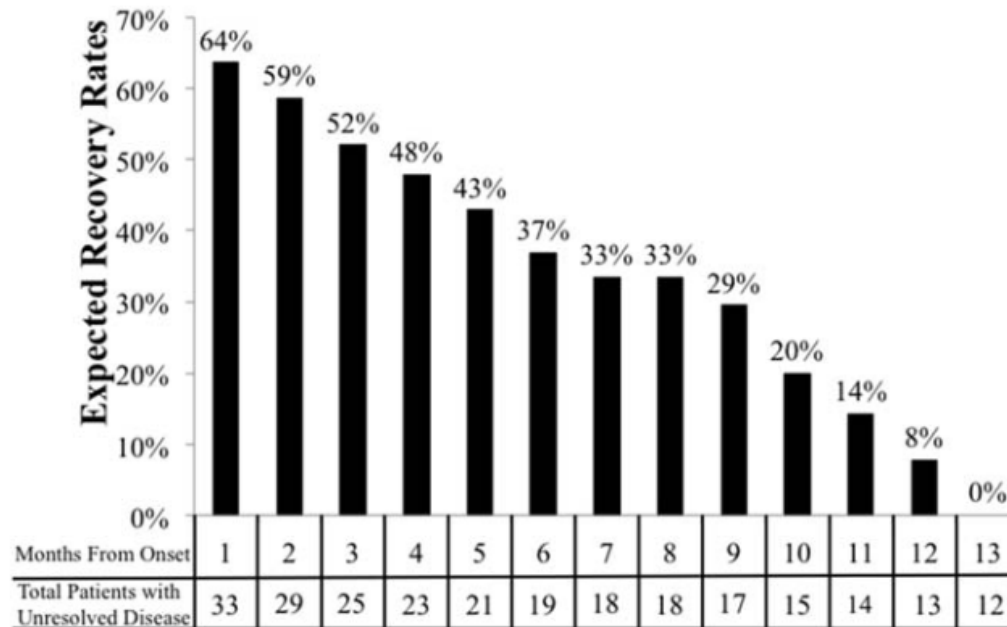


Fig. 5. Proportion of idiopathic vocal fold paralysis patients who will recover, according to month from onset, shown as a percentage of the total number of patients who still have not recovered at X number of months. The total number of patients with unresolved disease decreases each month as patients who recover are eliminated from the pool. This number is shown below the graph. The percentages shown reflect the patients who will eventually recover but have not yet, over the total number of patients still with unresolved disease at that time point.

- Percentages of voice recovery as function of time since the onset

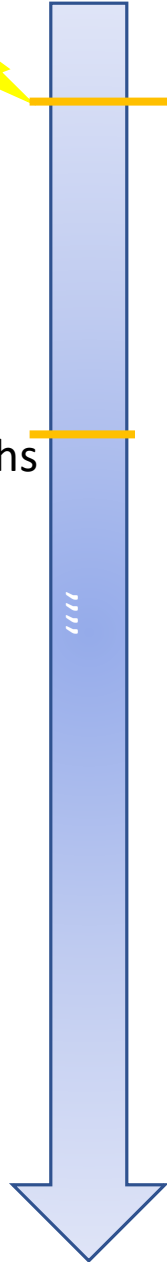
[Time Course of Recovery of Iatrogenic Vocal Fold Paralysis.](#)

Husain S, Sadoughi B, Mor N, Sulica L. *Laryngoscope*. 2019 May;129(5):1159-1163. doi: 10.1002/lary.27572.

Aims of the treatment-UVFP

- Improve the voice of patients
 - And liquids swallowing safety
- Adapted to
 - Expected natural evolution of the voice
 - Patient's vocal needs
 - Patient's expected survival
 - Patient's health condition at the moment of the treatment

Nerve
Section



6-12
months

Immediate nerve suture !!!!

- Suture RLN to RLN
 - When enough length
 - End to end suture
 - Epi-peri-neural titches
 - Under microscope or surgical loops
 - 9/0 thread
- Suture Ansa cervicalis (branch)-RLN

Nerve
Section

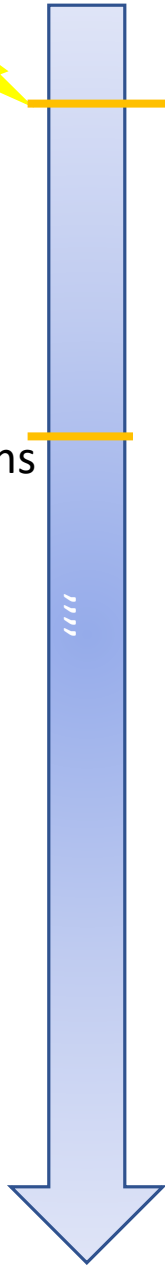


No immediate nerve suture

6-12
months

Secondary reinnervation

- Suture Ansa cervicalis (branch)-RLN



Nerve
Injury



Patient with good survival
expectation and good health
condition

+/- Speech therapy

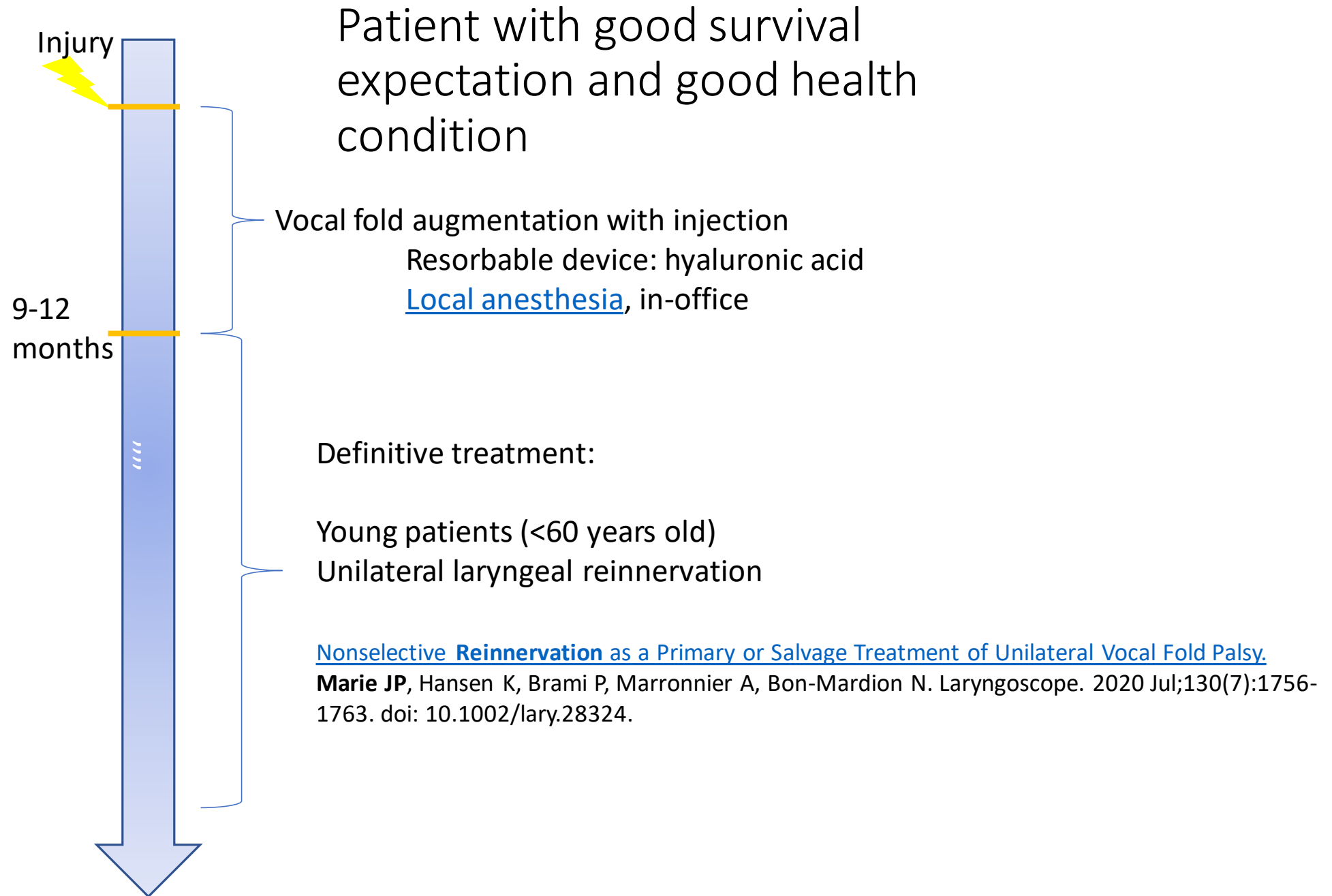
Vocal fold augmentation with injection

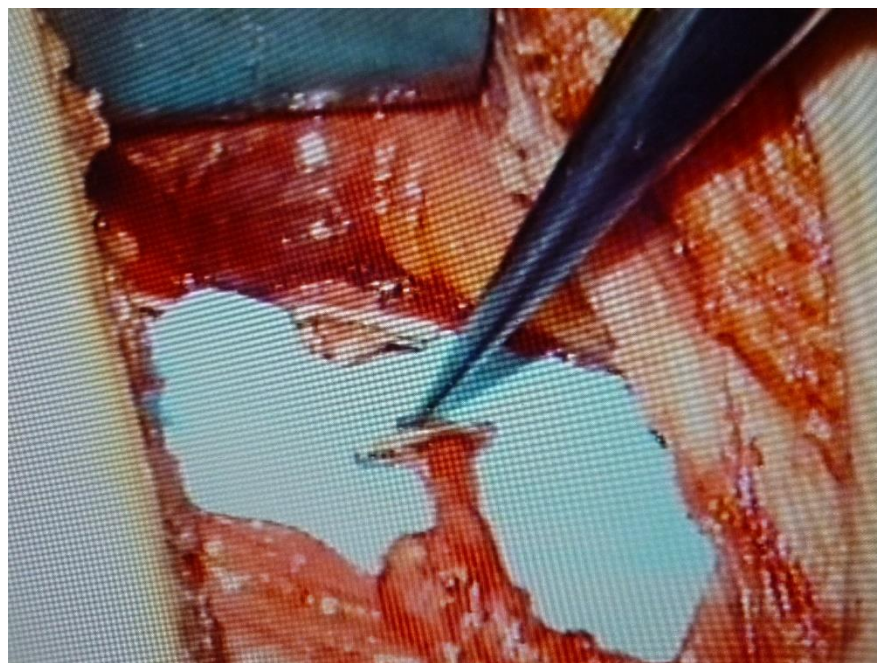
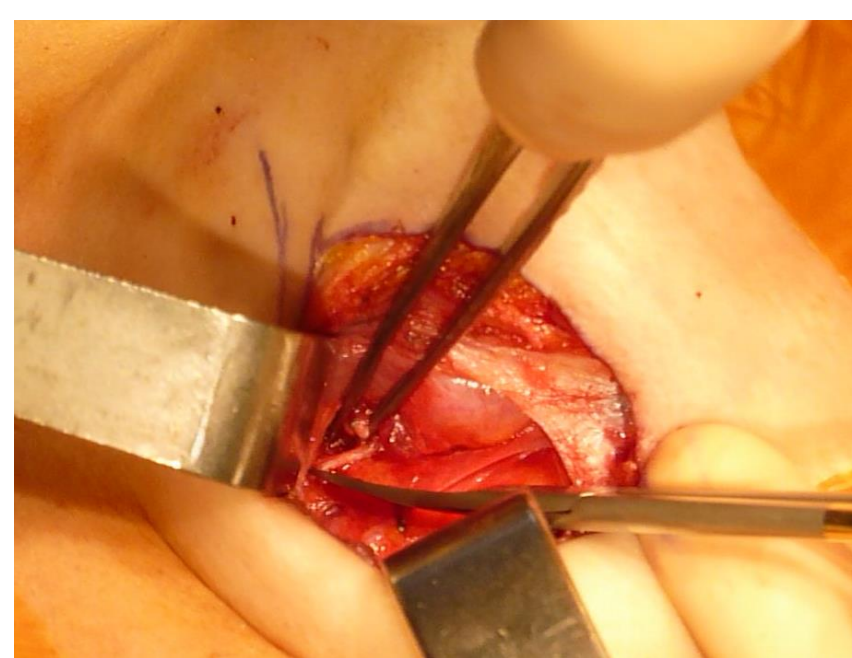
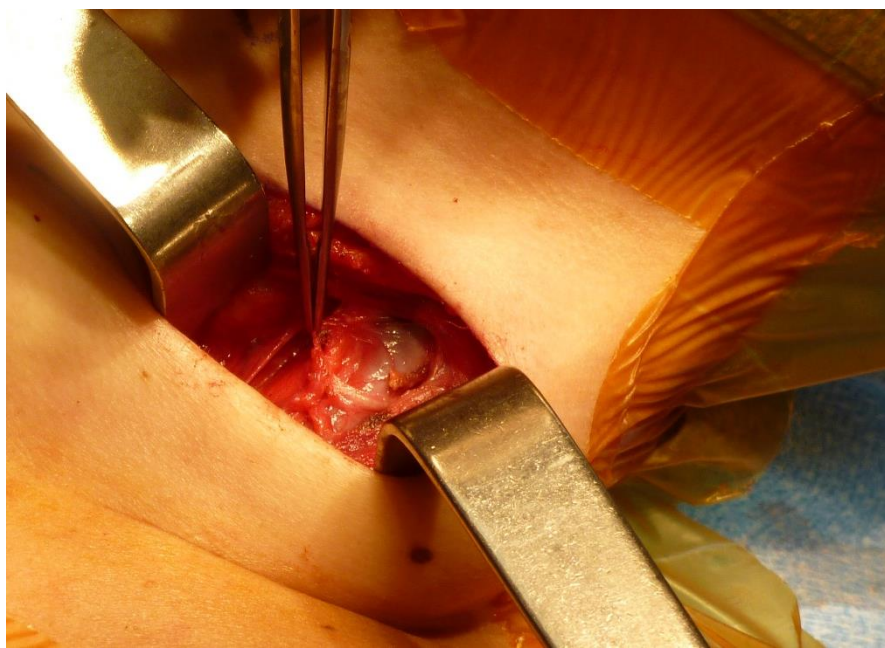
Resorbable device: hyaluronic acid

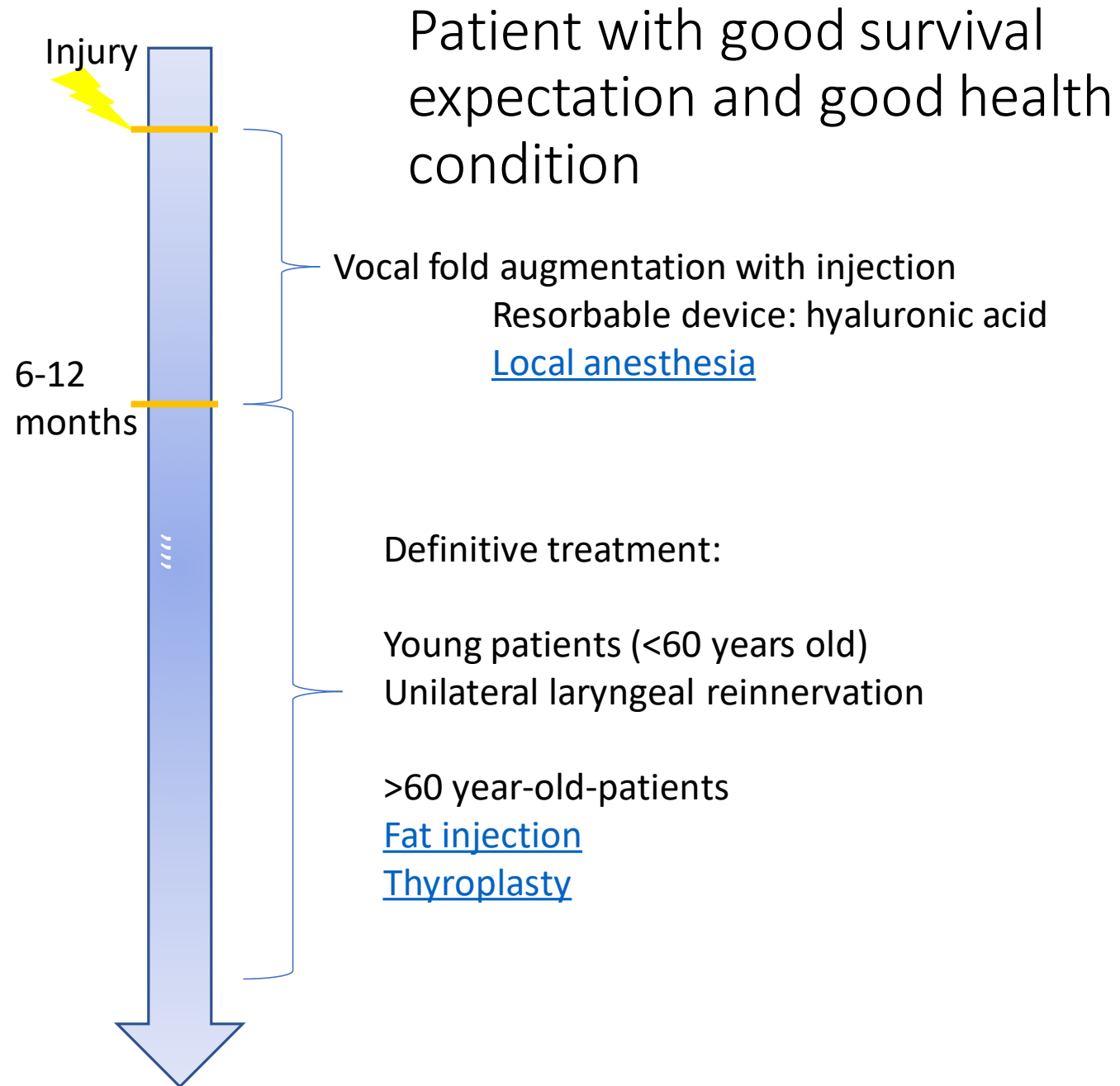
Local anesthesia, in-office

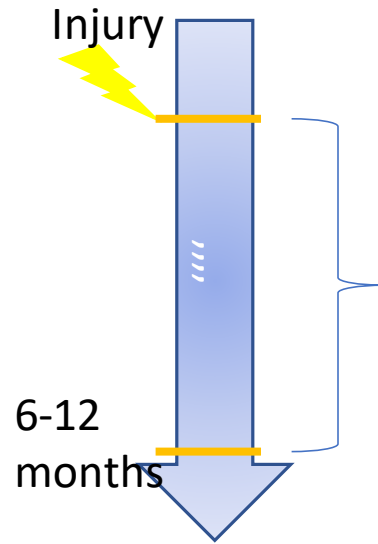
9-12
months











Patient with poor survival
expectation (<2 years)

Definitive treatment

Good health condition

General anesthesia:

Autologous fat injection

Local +/-sedation

Thyroplasty

Poor health condition/
contra-indication to general anesthesia:

- Fiberscope guided injection
hyaluronic acid (juvederm), or
Calcium hydroxyapatite (Renu
Voice)

- Thyroplasty

Very poor health condition:

- (repeated) Fiberscope
guided injection
hyaluronic acid
(juvederm), or Calcium
hydroxyapatite (Renu
Voice)

Conclusions

- Importance of synkinesis and nervous growth after injury
 - Which is responsible for the evolution of the pathology
- Several surgical treatments are now available
- Suited for each patient and each time of the course of the UVFP

Thank you for your attention

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CUBEX CENTRE PRAGUE
4th – 7th JUNE 2025



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