

Vocal Health problems in performing artists: BAPAM recommendations to GPs regarding voice clinic referral.

BAPAM's Vocal Health Working Group advises us on best practice in vocal health. This group comprises Ear Nose and Throat specialist doctors, Speech and Language Therapists, Physiotherapists and Vocal Rehabilitation Coaches from across the country.

The literature on dysphonia demonstrates that **singers** who present with voice disorders are most likely to have **Muscle Tension Imbalance (MTI)** rather than organic pathology or structural abnormality, and this is not always picked up in general ENT clinics, or even in all Voice Clinics. Ideally, MTI in singers is assessed via nasendoscopy by a Multidisciplinary Team (MDT) including a Vocal Rehabilitation Coach with experience/training in the assessment of the larynx and vocal tract in a wide range of singing styles. Such MDTs are available in the NHS in certain Specialist Voice Clinics, which have access to equipment including high definition cameras with stroboscopic or high-speed videos. The team in these clinics would normally include:

- Voice Specialist Laryngologist*
- Voice Specialist Speech and Language Therapist
- Vocal Rehabilitation Coach (Singing Voice Specialist)
- Performance Specialist Osteopath/Physiotherapist (in some clinics)

*Some Specialist Clinics are SLT-led with Laryngologist review.

Referral. There are many Voice Clinics in the NHS nationwide, but we recommend that, whenever possible, professional voice users, including singers, are seen in Specialist Voice Clinics as described above, where there is stroboscopy and access to a Multidisciplinary Team, or in a clinic that is led by clinicians who are highly experienced in caring for the professional voice and are knowledgeable about the multidisciplinary approach and optimal care pathways.

If a Specialist Voice Clinic is not available, information about the facilities available at other NHS Voice clinics can be found at <https://www.britishvoiceassociation.org.uk/downloads/voice-clinics/Voice%20Clinics%20Information%20Booklet%20-%20January%202020.pdf>

Recommended NHS Specialist Voice Clinics include:

- Birmingham, Queen Elizabeth (Anita Sonsale ENT)
- Cardiff, Royal Glamorgan (Huw Williams ENT)
- Cardiff, University Hospital of Wales (Gareth Williams ENT)
- Doncaster Royal Infirmary (Jane Shaw SLT)
- Glasgow, Greater Glasgow and Clyde (Fiona Mcgregor ENT)
- Liverpool, Royal Liverpool and Broadgreen University Hospitals (Mr Webb – ENT, Sally Dennis SLT and Jo Clayton SLT)
- London, Guy's/St Thomas' (Yakubu Karagama – ENT led, and Tori Burnay - SLT led)
- London, Lewisham (Nick Gibbins ENT, Tony Aymat ENT, Rehab Awad SLT)

- London, Royal National ENT and Eastman Dental Hospitals (John Rubin ENT, Jonathan Fishman ENT)
- Manchester, Wythenshawe (Sue Jones SLT)
- Newcastle, Freeman (Natalie Eastwood SLT)
- Nottingham University Hospitals (Julian McGlashan ENT)
- Slough, Wexham Park (Declan Costello ENT)

Who to refer: BAPAM recommends that the following **groups of patients** presenting with voice problems should be referred to NHS Specialist Voice Clinics:

- Elite Performers (professional singers, actors, broadcasters, etc.)
- Studying Performers (FE, Undergraduate and Postgraduate singers and actors)
- Quality of Life Performers (amateur singers for whom singing is their primary means of socialising, such as older local choir members)
- In these patients, referral to a Specialist Voice Clinic should be made for **any vocal symptom lasting more than 2-3 weeks**, or persisting for more than 2 weeks after the resolution of a viral or bacterial upper respiratory infection.

Examples of Relevant Presenting Voice Problems:

- Loss of range, power, flexibility
- Pain, fatigue, hoarseness
- Gaps in range, delayed onset of phonation
- Increased recovery or warm-up time
- Chronic throat-clearing, sensation of lump in throat (globus).

Patient Outcomes:

- Faster recovery times due to accurate diagnosis and specialist treatment, saving time and money in the long run
- If organic lesions are present the patient can be listed for surgery immediately or referred for Speech Therapy and then reviewed
- Functional disorders will be referred for Speech and Language Therapy and/or Vocal Rehabilitation
- Musculoskeletal disorder will be referred for Osteopathy/Physiotherapy
- Psychogenic disorders will be referred to Speech and Language Therapy and onwards to Psychology/Talking therapies as appropriate
- Most patients will be referred to more than one of the above.

“Vocal rehabilitation is a truly multidisciplinary endeavour, with crucial contributions from laryngologists and speech therapists. A central member of this team is the Vocal Rehabilitation Coach who is uniquely placed between the medical clinicians and the performers to carry the scientific aspects of vocal treatment into their performance practice.” Mr. Declan Costello - Consultant Laryngologist

“Following treatment for any vocal problem, like any injury one might sustain during physical exercise, a patient must rehabilitate appropriately with the aim of getting back to their pre-morbid state; to allow them to sing and speak again. In the same way that you must learn to walk before you can run, one must set up the larynx correctly before trying to push its limits. Speech therapy achieves this but translating this laryngeal work into the singing voice requires a vocal rehabilitation expert.” Mr. Nicholas Gibbins - Consultant Laryngologist

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