#### **Patient Information**

# Microlaryngoscopy and Division of Anterior Laryngeal Web

# What is an Anterior Laryngeal Web?

An **anterior laryngeal web** is a thin band of tissue between the **vocal cords**, usually located at the **front (anterior)** part of the voice box (larynx). It may be present from birth (**congenital**) or develop later due to **injury**, **infection**, or previous surgery.

This web can affect the **voice** (causing it to sound weak, hoarse, or high-pitched), and in some cases may cause **breathing difficulties**.

# What is Microlaryngoscopy and Division of the Web?

This is a surgical procedure done under **general anaesthetic** to:

- Closely examine your voice box using a microscope
- Divide (cut through) the web using delicate instruments or a laser
- Restore normal vocal cord movement and improve voice or breathing

# Why Do I Need This Operation?

You may be recommended this surgery if:

- Your voice is **affected** (e.g. hoarseness, limited pitch range, vocal fatigue)
- You are experiencing **breathing difficulties** or noisy breathing (stridor)
- The web is affecting vocal cord movement or closing

The procedure aims to improve the function of the vocal cords by carefully separating the web and preventing it from growing back.

#### What Does the Procedure Involve?

- You will be given a general anaesthetic (you will be asleep).
- A rigid tube (laryngoscope) is gently inserted through your mouth to access your voice box — no external cuts are made.
- A microscope is used to provide a detailed view.
- The web is divided using **fine instruments** or a **laser**.
- In some cases, a small stent (spacer) may be placed temporarily to help keep the vocal cords apart during healing and prevent the web from reforming.

The operation typically takes around **60 minutes**.

Copyright © 2025 Sevas, Winnie Yeung - All Rights Reserved.

#### What Are the Risks?

Microlaryngoscopy and web division is generally safe, but like all surgery, there are some risks:

#### Common (usually temporary):

- Sore throat or mild discomfort for a few days
- Hoarseness or voice changes while healing
- Swelling or mild bruising in the throat

#### Less common:

- Bleeding
- Infection
- Reformation of the web, which may require repeat surgery
- Scarring, which could affect the voice
- **Injury to teeth, gums, or lips** from the instruments (rare)

If a **stent** is used, there may be additional monitoring and a second procedure to remove it.

# **Recovery and Aftercare**

- Most patients go home **the same day** or after an overnight stay, depending on the case.
- You may need to follow a period of **voice rest** (usually a few days).
- Your surgeon will advise if any dietary restrictions or care around a stent are needed.
- Voice therapy may be recommended after surgery to support healing and voice recovery.
- Full recovery may take **several weeks**, especially if a stent is used.

#### When to Seek Medical Advice

Contact your doctor or hospital if you experience:

- Breathing difficulty
- Ongoing or heavy bleeding
- **High fever** or signs of infection
- Severe or worsening pain

## Follow-Up

You will have a **follow-up appointment** to:

- Monitor healing
- Remove the stent (if used) in a further operation
- Discuss voice recovery and further treatment or therapy if needed

Copyright © 2025 Sevas, Winnie Yeung - All Rights Reserved.

### Conclusion

- An anterior laryngeal web is a band of tissue affecting your voice or breathing.
- Surgery is done under general anaesthetic to divide the web and improve function.
- Recovery includes voice rest, possible voice therapy, and follow-up care.
- Risks are low, but reformation of the web can occasionally occur.

#### **Further Information**

If you have any concerns or need further advice, please contact your healthcare provider.