## **C10**

# Dysphagia found in the patient who has Vocal cord palsy without CNS lesions

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### Introduction

Generally, the main cause of dysphagia is CNS lesions of a stroke. It has been known that dysphagia is triggered by the absence of coordination which is caused by imbalanced function and lowered regulation ability of pharyngeal muscle. Therefore, dysphagia evaluation and treatment are performed in many rehabilitation departments, as well as in this hospital. This case report tries to introduce the dysphagia case caused by the vocal cord palsy which occurred without any CNS lesions and anatomical abnormality.

#### **Case presentation**

This female patient aged 74 has suffered from Dysphagia, Dysphonia since Jan. 2, 2018, and had evaluation examinations including Brain MRI at a local hospital. However, there were no special opinions. On Jan. 22, 2018, her symptom got worse and lasted, and she came to be hospitalized in this department via ER of this hospital. According to the VFSS conducted on Jan. 23, 2018, she was found to have semisolid remnant 50% and Liquid 8cc during swallow aspiration. In such examinations as Brain MRI, Brain MRA, and Neck MRA conducted on the same day, no special opinions were found. In Neck CT, Chest CT, and EGD which were conducted to identify any anatomical abnormality, no special opinions were observed. In the joint treatment of otolaryngology, Rt. vocal cord palsy was observed on otolaryngology. After Rt. vocal cord Restylene injection was performed on Jan. 26, 2018, vocal cord palsy was improved. VFSS f/u was conducted again. As a result, Semisolid remnant reduced to 30%, and Liquid 8cc non aspiration was observed. Therefore, home discharge was offered under oral intake.

#### Conclusion

This patient had Dysphagia, Dysphonia suddenly without any CNS lesions and anatomical abnormality. After the treatment of vocal cord palsy, the symptom was improved and she was discharged from hospital. As the causes of vocal cord palsy that occurs out of sudden, there are Surgery complications, Neck injury, Stroke, and Tumors. However, such causes were not found in this patient, and her possible cause was subclinical viral infections. After viral infections which occurred for unknown causes, she had vocal cord palsy which triggered Dysphagia. After the simple treatment of Filler injection, Dysphagia was treated. Therefore, when a patient with Dysphagia is hospitalized, it is necessary to take into account the possibility of vocal cord palsy without CNS lesions and to solve the problem if it occurs.



Fig 1. Rt. vocal cord palsy (Initial)

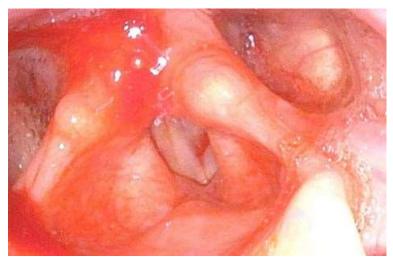


Fig 2. Post Restylene injection