

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

BAPAM's Vocal Health Working Group advise 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. MTI in singers is assessed via nasendoscopy in a few specialist NHS Voice clinics by a multidisciplinary team including a Vocal Rehabilitation Coach with experience/training in the assessment of the larynx and vocal tract in a wide range of singing styles. These specialist Voice clinics have access to equipment and personnel qualified to deal with this type of problem in professional singers, 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.

## **Referrals**

BAPAM recommends that the following **groups of patients** presenting with voice problems should be referred to these specialist NHS 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)

## **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)

A 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 infection.

## **Patient Outcomes:**

- Accurate diagnosis and specialist treatments speed up recovery times and save 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 access Psychology/Talking therapies as appropriate;
- Most patients will be referred to more than one of the above.

## **Recommended NHS Clinics**

These clinics are Specialist Multidisciplinary Voice Clinics or are led by clinicians who are highly experienced in caring for the professional voice and knowledgeable about optimal care pathways.

- London, Lewisham (Mr. Nick Gibbins, Mr. Tony Aymat)
- London, Guys/St Thomas (Mr. Yakubu Karagama - ENT led, and Ms. Tori Burnay - SLT led)
- London, Royal National ENT and Eastman Dental Hospitals (Mr. John Rubin, Mr. Jonathan Fishman)
- Manchester, Wythenshawe (Ms. Sue Jones, SLT-led)
- Birmingham, Queen Elizabeth (Mrs. Anita Sonsale, from May 2019)
- Doncaster (Ms. Jane Shaw SLT-led)
- Nottingham (Mr. Julian McGlashan)
- Slough (Mr. Declan Costello, Wexham Park)
- Glasgow (Miss. Fiona McGregor, Greater Glasgow and Clyde)
- Cardiff (Mr. Huw Williams, Royal Glamorgan)
- Cardiff (Mr. Gareth Williams, University Hospital of Wales)

*“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

## **BAPAM Vocal Health Working Group**

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