

## Focus on the larynx

Occasionally, issues of the JLO have a focus on a particular aspect of otorhinolaryngology. This particular issue accordingly has a strong focus on laryngology. A number of articles address significant subject matter in this area. Perhaps the most important question is the choice of laser excision or radiotherapy for early laryngeal squamous cell carcinoma. In their systematic review, O'Hara and colleagues<sup>1</sup> conclude from published studies that there is no demonstrable difference in local control rates for tumour stage 1a glottic squamous cell carcinoma treated by transoral laser surgery or radiotherapy.

Another contentious area in laryngology is whether to recommend voice rest following vocal fold surgery. This practice, one suspects, has been handed down over the years with no real evidence of efficacy. Indeed, in a survey of current practice in the UK, Coombs and colleagues<sup>2</sup> found a lack of consistency in advice given to patients after vocal fold surgery, reflecting the paucity of the evidence base. Voice rest may be beneficial in terms of vocal fold healing but can have adverse effects on the patient's quality of life. In another article on vocal rehabilitation, Bradley and colleagues<sup>3</sup> investigate the provision of surgical voice restoration in England for patients with laryngeal cancer. Perhaps unsurprisingly, this study's findings indicate a wide variation in the availability and quality of surgical voice restoration. The authors advocate a national management and care protocol in order to improve services. A particular area of concern was the lack of written pathways for laryngectomy patients presenting out of hours with airway difficulty.

In the examination of the upper respiratory tract, many practitioners have come to rely on endoscopes and headlights. The art of using a classical head mirror has been all but lost by many young otolaryngologists. In their article comparing the optical

characteristics of head mirror versus headlight examination, Lin and colleagues<sup>4</sup> suggest that the humble mirror should not be abandoned. Head mirrors provide better, shadow-free illumination and perform better in experienced hands.

Lastly, in today's internet age many of us are used to patients attending consultations 'armed' with a collection of information downloaded from various websites. There are many excellent web-based resources available, but many, we suspect, are of dubious value. Biggs and colleagues<sup>5</sup> investigated the utility of the YouTube video website as a source of information on rhinosinusitis. They found that 55 per cent of videos contained little or no useful facts, and that 27 per cent were potentially misleading or dangerous. Unfortunately, the almost total lack of scrutiny or regulation of these resources produces the possibility of patients coming to real harm.

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### References

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