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SELECTION OF TREATMENT TACTICS FOR UNILATERAL VOCAL CORD PARESIS/PARALYSIS

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Objectives:

The purpose of the following research is to promote the selection of optimal treatment tactics in unilateral vocal cord paresis/palsy.

Methods:

38 patients were examined during the study. All patients underwent ENT examination and indirect video laryngoscopy. The results of anamnestic and clinical-instrumental examinations were collected and analyzed. Breath and phonetics, LaxVox exercises, injection medialization and combined therapy were performed in patients.

Results:

In patients with unilateral vocal cord paresis/palsy, it is important to evaluate the condition of the vocal cords in the selection of treatment tactics. In case of unilateral vocal cord paresis/palsy, the damaged vocal cord occupies the medial, paramedial, middle (intermediate) and lateral (dead) positions. In our observations, it was observed that in 25 patients, the affected vocal cord was paramedial, in 4 cases it was medial, in 8 cases it was intermediate, and in 1 case it was lateral. All patients underwent Lax Vox sound therapy. In patients with medial and paramedial vocal cords, the treatment effect was achieved in 21 patients with only voice therapy. In 4 paramedial and 8 middle and 1 patient, voice therapy was ineffective



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when the vocal cord was in a lateral position, in which injection medialization was performed.

Conclusions:

All patients with vocal cord paresis/palsy complained of hoarseness and shortness of breath when speaking. Achieving the effectiveness of treatment directly depends on the condition of the infected vocal cords. After a course of respiratory and phonic exercises, respiratory efficiency in phonation was significantly improved in all patients. Sound therapy is considered an effective method for medial and paramedial vocal cords. Medialization of the vocal cords should be practiced in the medial and lateral position.

Keywords: Unilateral vocal cord palsy, medialization, disphonia, Lax Vox therapy