

**COURSE DATA****DATA SUBJECT****Code:** 35287**Name:** Pathology of Voice**Cycle:** Undergraduate Studies**ECTS Credits:** 6**Academic year:** 2025-26**STUDY (S)**

Degree	Center	Acad. year	Period
1203 - Degree in Speech Therapy	Facultat de Psicologia i Logopèdia	2	Second quarter

SUBJECT-MATTER

Degree	Subject-matter	Character
1203 - Degree in Speech Therapy	Voice pathology	COMPULSORY

COORDINATION

ORTS ALBORCH MIGUEL HIGINIO

SUMMARY

The course content covers aspects related to the etiology, diagnosis, and treatment of human voice disorders.

The first topics cover the anatomy and physiology of the vocal organs, focusing on the larynx.

The examinations for diagnosing different human voice disorders, both functional and endoscopic, are specified.

Regarding the treatment of vocal disorders, the importance of speech therapy is emphasized as a fundamental pillar, and medical and surgical treatment is also reviewed.

PREVIOUS KNOWLEDGE**RELATIONSHIP TO OTHER SUBJECTS OF THE SAME DEGREE****1203 - Degree in Speech Therapy**



Obligation to have previously passed the subject(s)

35272 - Anatomy of Language and Hearing Organs
35273 - Physiology of Language and Hearing Organs

OTHER REQUIREMENTS

No enrollment have been specified with other subjects in the curriculum

COMPETENCES / LEARNING OUTCOMES

1203 - Degree in Speech Therapy

Be able to develop skills such as regulating their own learning, solving problems, reasoning critically and adapting to new situations.

Develop communication skills in the general population.

Explain and argue the treatment selected for each patient.

Explore, evaluate, diagnose and predict the evolution of communication and language disorders from a multidisciplinary perspective.

Have autonomy and take responsibility for decision making.

Knowledge of the physiology of the organs of speech, hearing and voice.

Know the anatomy of the organs of speech, hearing and voice.

Students must be able to apply their knowledge to their work or vocation in a professional manner and have acquired the competences required for the preparation and defence of arguments and for problem solving in their field of study.

Students must be able to communicate information, ideas, problems and solutions to both expert and lay audiences.

Students must have developed the learning skills needed to undertake further study with a high degree of autonomy.

Students must have the ability to gather and interpret relevant data (usually in their field of study) to make judgements that take relevant social, scientific or ethical issues into consideration.

Use the exploration techniques and instruments typical of the profession and record, synthesize and interpret the data provided by integrating them into the information set.

DESCRIPTION OF CONTENTS

1. ANATOMY OF THE LARYNX AND PHARYNX



LARYNX:

Knowledge of the location of the larynx in the neck.

External or cervical view, internal or endoscopic view.

Anatomical parts of the larynx: cartilages, membranes, ligaments and muscles.

Innervation

Regions of the larynx: supraglottis, glottis and subglottis

Relationship with other organs

PHARYNX:

Anatomical parts of the pharynx: nasopharynx, oropharynx and hypopharynx

Relationship with the larynx and other anatomical structures

2. PHYSIOLOGY OF THE LARYNX AND PHARYNX

Functions of the larynx: Sphincter, phonatory and respiratory

Functions of the pharynx: Swallowing, phonatory, respiratory and immunological

3. EXAMINATION OF THE LARYNX AND VOICE

Parts of the examination of the larynx and voice

Medical history

Physical Examination: Listening to the Voice, Indirect Laryngoscopy and Pharyngolaryngeal Endoscopy

Complementary Examinations: Stroboscopy, Voice Analysis, Radiology, etc.

4. MALFORMATIONS OF THE LARYNX

Classification of Malformations of the Larynx

Structural

Of the laryngeal lumen

Of the vocal cords

Congenital tumours

Diagnosis and Treatment

5. DYSFUNCTIONAL AND PSYCHOGENIC DYSPHONIA

Classification of Dysfunctional Dysphonia WITHOUT LESIONS in the larynx

Hypertonic

Hypotonic

Diagnosis and Treatment

Psychogenic Dysphonias

6. DYSFUNCTIONAL DYSPHONIAS WITH SECONDARY LESIONS

Classification of Dysfunctional Dysphonias with Secondary Lesions in the Larynx

Vocal Nodules

Vocal Polyp

Reinke's Edema

Vocal Cyst

Granulomas...

Diagnosis

Speech therapy and surgical treatment



7. CHILDHOOD DYSPHONIA

Anatomical overview of the larynx in children
Etiology of Dysphonia in Childhood
Malformations
Acquired Lesions: Vocal Nodules
Laryngeal Paralysis
Inflammatory Processes
Tumours: Laryngeal Papillomatosis
Diagnosis and treatment

8. LARYNGEAL TRAUMA

Classification and aetiopathogenesis of laryngeal trauma
Internal: Clinical forms: Post-intubation granuloma, vocal haematoma
External: Open and closed
Diagnosis and treatment
Tracheotomy: Concept, types and indications

9. LARYNGEAL PARALYSIS

Review of the innervation of the laryngeal muscles and their function
Classification and Etiology of Laryngeal Paralysis:
Unilateral: Recurrent Paralysis
Bilateral: Dilator Paralysis, Closure Paralysis, and Opening Paralysis
Diagnosis and Treatment

10. SPASMODIC DYSPHONIA

Concept and pathophysiology
Types of spasmodic dysphonia.
Adductor
Abductor
Mixed
Diagnosis and differential diagnosis
Treatment: Speech therapy, surgery, neuromuscular block

11. PHONOCIRURGY

Description
Indications for Phonosurgery
Vocal Cord Lesions
Movement Disorders
Vocal Pitch Change Surgery: Feminisation and Masculinisation of the Voice
Description of the Material Used
Phonosurgery Techniques

12. ACUTE AND CHRONIC LARYNGITIS

Classification and Concept of Laryngitis
Acute: Epiglottitis, catarrhal laryngitis and subglottic laryngitis
Chronic: Nonspecific/precancerous lesions
Red and white laryngitis
Diagnosis and treatment



Role of the speech therapist

13. LARYNGEAL CANCER

Concept and epidemiology

Location: Supraglottis, glottis and subglottis

TNM Classification

Symptoms and Progression of Each Location

Diagnosis

Treatment: Surgery, Radiotherapy, and Chemotherapy

Postoperative Care/Nutrition

14. REHABILITATION OF LARYNGECTOMY PATIENTS

Need for a Multidisciplinary Team

Consequences and After-effects of Total Laryngectomy and its Treatment:

Permanent tracheal stoma

Loss of physiological voice

Exclusion of the upper airways in breathing

Psychosocial effects

Voice Rehabilitation

Esophageal Voice or Erigmophony

Electrolarynx or Laryngophone

Tracheoesophageal Communication: VOICE PROSTHESES: Management and Maintenance

Swallowing Rehabilitation: Nasogastric Tube, Oral Tolerance

Psychosocial Support and Rehabilitation

15. FEMINISATION AND MASCULINISATION OF THE VOICE

Anatomy and physiology of the voice: Differences between men and women

Clinical examination protocol for the voice in transgender women

Hormone therapy with oestrogens and its effect on the voice

Surgical techniques for voice feminisation

Speech Therapy Techniques for Feminisation of the Voice

Masculinisation of the Voice and Speech Therapy Techniques

Surgical Treatment of Masculinisation of the Voice

16. DYSPHAGIA

Swallowing Process

Types and Consequences of Dysphagia

Examination

Methods of Study and Screening

Treatment and Management of Dysphagia and Rehabilitation

17. SPEECH AND LANGUAGE DISORDERS

Communication Disorders: Management and Treatment



Speech: Dyslalia, Dysglossia, Dysarthria
Speech
Language: Specific Disorders, Aphasia, Dysphemia

18. VOICE DISORDERS. RHINOLALIA

Types of Rhinolalia
Open
Closed
Mixed
Etiology
Clinical Evaluation of Rhinolalia: Diagnosis
Fringolalia: Causes and Management

WORKLOAD

PRESENCIAL ACTIVITIES

Activity	Hours
Theory	45,00
Clinical practice	5,00
Total hours	50,00

NON PRESENCIAL ACTIVITIES

Activity	Hours
Attendance at other activities	10,00
Individual or group project	15,00
Independent study and work	20,00
Preparation of lessons	20,00
Preparation for assessment activities	10,00
Resolution of case studies	15,00
Total hours	90,00

TEACHING METHODOLOGY

- Theoretical classes: Lectures with audiovisual support, master classes, explanations of content and class discussions. Interaction with content.
- Practical classes: Clinical sessions held in university hospitals, case studies, performance of examination techniques and participation in practical activities under supervision. Seminars with practical cases.
- Individual or group tutorials.
- Use of online teaching resources
- Preparation of individual assignments, case studies, reports and other practical activities.

EVALUATION



The assessment system will be the same for both the first and second exam sessions.

SE1: Assessment of theoretical and practical content through written tests. This section will account for 80% of the final grade.

SE2: Attendance at hospital practical sessions and completion of tasks during these sessions.

This section will account for 20% of the final grade. This section cannot be retaken and the grades will remain the same in the second exam session.

Students who have completed 80% of attendance at the practical sessions may sit the first exam session. Students who did not take the first exam and those who failed the first exam may take the second exam.

Minimum requirements: Attendance at hospital practical sessions is compulsory, and to take the assessment exam, students must attend at least 80% of these sessions and justify their absences adequately due to force majeure.

To pass the course, both in the first and second exam sessions, it will be necessary to obtain a minimum of: - 4 points out of 8 in SE1.- 1 point out of 2 in SE2.

Only the different sections covered in the assessment will be added together when the minimum requirements established for each of them are met.

In the event of fraudulent practices, the procedure set out in the Protocol for dealing with fraudulent practices at the University of Valencia (ACGUV 123/2020) will be followed: <https://www.uv.es/sgeneral/Protocols/C83sp.pdf>.

As indicated in the regulations for the awarding of Honours, this will be done in strict order of grade. In the event of a tie, the Honours will be awarded to the student with the highest grade in SE1. If the tie persists, the grade in section SE2 will be used. If all of them are still equal, the teacher may give an additional test to the students involved.

REFERENCES

Basic

- Cobeta, I Núñez, F. Fernández, S. (2013). Patología de la voz. Ed Marge Books.
- Probst, R., Grevers, G. y Iro, H. (2018, second edition). Basic Otorhinolaryngology. A Stepby-Step Learning Guide. Georg Thieme Verlag.
- Bsterra Alegria J (2009). Tratado de Otorrinolaringología. Ed Masson Elsevier.
- Casado Morente, J.C. & Martín Sanz, E. (2019). Tratado de la Voz. Ed Panamericana.
- Ysunza, A. (2017). Patología de la voz: Evaluación y tratamiento. Ed Trillas.

Supplementary

- Boone, D.R., McFarlane, S.C., Von Berg, S.L., & Zraick, R.I. (2020). The Voice and Voice Therapy. (10^a ed.). Pearson.
- Sataloff, R.T. (2020). Voice Disorders. (4^a ed.). Plural Publishing.
- Borràs, M. (2008). La voz y sus trastornos. Ed Masson.
- Colton, R.H., Casper, J.K., & Leonard, R. (2011). Understanding Voice Problems. Ed Lippincott Williams & Wilkins.



- Voice Disorders Database (ASHA).
- Normas SEORL/SEF para clasificación de disfonías y patología vocal.
- Herramientas digitales: Voice Handicap Index (VHI), GRBAS, Videolaringoestroboscopia.
- Scherer, R.C., Titze, I.R., & Raphael, B.N. (Eds.) (2020). Vocal Health and Pedagogy. Ed Plural Publishing.
- Vilaplana, J., & Garrido, M. (2010). Higiene vocal y prevención en profesionales de la voz. Revista de Logopedia, Foniatría y Audiología.