

MODERN INTERPRETATION OF THE ORIGIN AND TREATMENT OF SYMPTOMS OF LARYNGITIS

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Abstract: Laryngitis is rarely an independent pathology and occurs first - as a rule, it continues the course of other diseases of the upper respiratory tract (pharyngitis, tracheitis) and is combined with them. It affects people of all ages - both adults and children. Patients under 5 years old, 7-8 years old are at risk of developing acute stenotic laryngotracheitis or laryngeal stenosis - an emergency that requires urgent medical attention.

Key words: Laryngitis, origin, treatment, preventive measures for prevention.

Types

According to the nature of the current, they are divided into:

acute laryngitis (appears suddenly, accompanied by severe symptoms);

chronic laryngitis (occurs with alternating phases of exacerbation and remission, even during exacerbation its symptoms are smoothed and not clearly expressed).

Otorhinolaryngologists distinguish the following types of laryngitis depending on the structural changes in the mucous membrane of the throat:

catarrhal (the simplest form);

hypertrophic (characterized by the formation of nodular tumors in the ligaments; clinically, voice changes predominate);

atrophic (the mucous membrane of the larynx thins, not only the larynx, but also the back of the larynx is involved in the pathological process);

hemorrhagic (characterized by the presence of obvious bleeding in the laryngeal mucosa);

stenosis or obstructive (occurs in children under 5 years old and is characterized by rapid development of narrowing of the larynx - stenosis).

Depending on the etiological factor, laryngitis in adults and children can be infectious or non-infectious. Infectious, in turn, is divided into nonspecific (caused by ARVI and nonspecific bacteria) and specific.

The most common types of special laryngitis:

diphtheria (observed in diphtheria);

syphilitic (in the 2-3 stages of syphilis, the laryngeal mucosa is injured, and scars appear on it as the wounds heal);

tuberculosis (thickenings in the form of tuberculosis appear on the mucous membrane).

Symptoms of laryngitis

Acute laryngitis in adults and children is characterized by the following symptoms:

sore throat;

dry throat;

dry paroxysmal ("bark") cough;

hoarseness up to aphonia (a condition in which the patient loses the ability to speak due to swelling of the vocal folds);

difficulty breathing.

A dry cough is almost constant or paroxysmal in nature and worsens when lying down. It is more effective - the patient coughs up a small amount of viscous sputum. Manifestations of intoxication syndrome are determined: increased body temperature, headache, fatigue, general weakness, sweating, etc.

Symptoms of chronic laryngitis, which mainly affects adult patients, are the same, but they are less intense. During remission, symptoms are minimal or absent.

Causes of laryngitis

The cause of most cases of acute laryngitis is infection - mainly viruses of the ARVI group (influenza, parainfluenza, adenovirus, etc.), measles virus, less - bacteria (whooping cough, diphtheria, scarlet fever, tuberculosis, etc.). Less often, the disease develops against the background of allergies, trauma or exposure to chemical irritants on the mucous membrane of the larynx.

Risk factors include:

hypothermia;

increased load on the vocal cords;

smoking;

staying for a long time in a dusty or chemically polluted room;

a decrease in local and systemic immunity due to severe somatic diseases, hypovitaminosis, overwork, severe stressful situations.

Treatment of laryngitis

Treatment of laryngitis in adults and children primarily includes a set of non-drug measures. The main recommendation is to provide voice rest for several days. In addition, the patient should not speak in a whisper, because in this case the ligaments are less loaded than speaking loudly. Drinking plenty of warm water relieves symptoms and quickly removes intoxication products from the body. A diet that excludes irritating foods (carbonated drinks, hot, spicy foods) reduces the mechanical effect on the affected mucous membranes. Quitting smoking is important.

Treatment of laryngitis with drugs includes: gargling with antiseptic solutions;

inhalation of a saline solution to moisten the respiratory tract;

oral antiseptics;

if the disease has a bacterial nature - antibiotic therapy (after identifying the pathogen);

antitussives / expectorants;

antipyretic.

Physiotherapy methods - UHF, electrophoresis, etc. are used as an auxiliary method as part of complex treatment.

Prevention of laryngitis

To reduce the risk of developing laryngitis, you should:

quit smoking;

do not overcool;

lead an active lifestyle;

full and balanced diet;

do not drink very cold drinks;

preventing stress on the vocal apparatus;

timely treatment of viral and bacterial infections of the upper respiratory tract;

do not provoke the course of somatic diseases that can negatively affect the immune system.

Rehabilitation

With the right actions of the patient, most cases of acute viral laryngitis lead to its recovery. Bacterial laryngitis becomes chronic, especially with an incorrect therapeutic approach (for example, with an incomplete course of antibiotic therapy) - the symptoms of such pathology accompany the patient throughout his life, periodically increasing or decreasing .

After recovery or remission, the patient should follow preventive measures that will help strengthen the positive effects of therapy and prevent the recurrence of the disease.

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