Peculiar Speech in a Case of Laryngeal Stenosis

We report the case of a 17-year-old boy who 16 years ago was the victim of a diphtheria which necessitated a tracheotomy. This resulted in a laryngeal obstruction that failed to be cured by laryngofissure and subsequent dilatation.

He learned to use a sort of frogs’ speech. In the description of its mechanism, the conception of the glosso-pharyngeal press is introduced. This is a pumping action of the muscles of the floor of the mouth, the tongue and the pharynx, that—like the abdominal press—serves manifold purposes (among which the Valsalva manoeuvre, glosso-pharyngeal breathing and oesophageal speech).

Slightly different to the parabuccal speech described by van Gilse, our patient brings the air into vibration by pressing it through a pseudoglottis formed between the tongue and the palatine arches. For this reason this variation of frogs’ speech may be called glosso-pharyngeal speech.

His speech was improved by exploiting a remnant of the early operation: a narrow fistula in the roof of the tracheostoma that emerges at the base of the tongue. This is kept open by an acrylic device. The respiratory air is guided through this fistula by a one way valve, and causes vibrations of the mucous folds in the hypo-pharynx which produce a clear voicelike sound.

With special exercises the boy was taught to articulate the speech sounds which for the most part were new to him.

As compared to the frogs’ speech, his speech has greatly gained in both intensity and intelligibility.

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