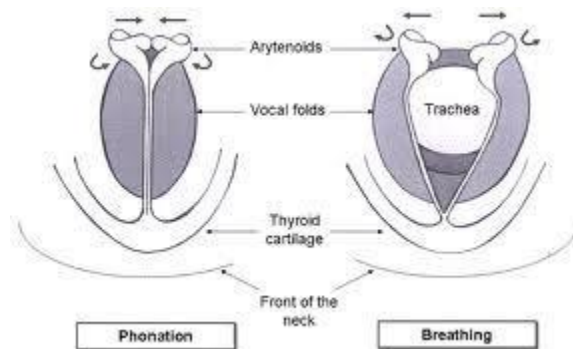


Calgary Voice Program- Pediatric



Paradoxical Vocal Fold Motion (PVFM) Information

PVFM (sometimes called Vocal Cord Dysfunction or VCD) is a problem with breathing caused when the vocal folds squeeze together while they should be open and relaxed. This is usually more pronounced when trying to breathe in, but can happen when breathing out as well. Normal vocal fold movement for phonation (talking) and breathing is illustrated below:



PVFM is a **functional** problem with breathing, rather than a **structural** or **neurological** problem. That is, the vocal folds have the ability to open appropriately, but close instead. This may happen for no reason at all, but may be made worse by uncontrolled reflux, exposure to irritants (e.g. strong scents), stress or panic, or exercise. The breathing difficulties caused by PVFM can mimic asthma; it is common for people with PVFM to have first been diagnosed with uncontrolled asthma. It is also possible for both PVFM and asthma to occur together.

Symptoms of PVFM

Stridor or noisy breathing

Inability to get the air in

“Breathing through a straw”

Sensation of tension in throat or chest

Other possible signs of laryngeal irritation:

Voice changes

Throat clear

“Lump” in the throat

Cough

Throat discomfort

Swallowing difficulties

Treatment of PVFM

The Speech-Language Pathologist (SLP) will use techniques adapted from treatment of voice disorders to

teach how to gain control of the vocal folds during breathing. General relaxation techniques may also be helpful. The SLP works on a team with a physician, who will consider treatment of any related medical concerns (e.g. GERD or asthma).

Breathing technique for Paradoxical Vocal Fold Motion (PVFM)

While breathing, the vocal folds should remain open and relaxed. During a PVFM “attack”, the vocal folds close together while you try to breathe in, creating a smaller opening. The breathing technique described below is designed to allow the vocal folds to relax and open more completely.

The goal is to maintain **a relaxed throat and continuous breathing**, avoiding both excessive tension and breath-holding.

Sniff-breath Technique

1. Relax. Let your tongue relax on the floor of your mouth, open your teeth and gently close your lips.
2. Take 3 or 4 short, quick sniffs in through the nose. The sniffs should be small and quiet.
3. Breathe out slowly through your mouth by making a gentle “s” or “sh” sound.

During an attack, repeat and continue the breathing technique until your throat feels relaxed and/or the PVFM attack has passed.

Practice regularly (i.e. 5-10 breath cycles every half hour that you’re awake).

Use the breathing technique as soon as you feel any tension in your throat.

Use the breathing technique as soon as you experience any symptoms of PVFM.

Continue the breathing technique for as long as the symptoms persist.

Upper Body Relaxation

Some people find that **upper body tension** interferes with their breathing. If that’s the case for you, you may find it helpful to spend some time stretching and relaxing as a part of your home practice routine.

Upper Body Stretches and Relaxation (don’t forget to breathe!)

- Rag doll
 - Roll shoulders forward five times.
 - Roll shoulders back five times.
 - Gently stretch left ear to left shoulder and then right ear to right shoulder. Drop head forward while feeling the weight of the head stretch the back of the neck. Repeat five times.
- Yes, no, I don’t know
 - Yes- slowly drop your chin to chest and lift up five times.
 - No- slowly turn your head side to side five times.
 - I don’t know- Raise shoulders up, hold for a few seconds and drop. Repeat five times