

Speechless: you don't need to be a singer to lose your voice

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Dr. James Daniero, an otolaryngologist at the UVA Health System, is trying to bring more awareness to people with voice disorders. Credit: Dan Addison, University Communications

Adele, Elton John, Justin Timberlake, Frank Sinatra, Celine Dion and

countless others have something in common beside the fact they've made a few bucks making music.

All have experienced [vocal problems](#) at one time or another due to the overuse of their [voice](#).

However, they are by far not the only ones suffering, according to Dr. James Daniero, an otolaryngologist at the University of Virginia Health System.

While Daniero's love for music influenced his career path – he did a fellowship at the Vanderbilt Voice Center in Nashville – he said a great number of the [patients](#) he treats have never had to hit a high note; they include teachers, lawyers, professors, cheerleaders and military personnel. Daniero said call center workers actually top the list, which makes sense when you think about it, since their job requires them to talk on the phone day and night.

In 2014, Daniero, with this wide range of patients in mind – and with the help of speech language pathologist and voice specialist Joanna Lott – started the laryngology division within UVA's Department of Otolaryngology-Head and Neck Surgery.

"There's a lot of wonderful things our voice does for us – singing, communication," Daniero said. "It's a beautiful thing that we have, and we take it for granted most of the time because if our voice is functioning, we tend not to think too much about it. But the second you lose your voice, you realize how critical it is to functioning in society."

On Saturday, Daniero and his UVA Voice Team put on a concert on the Downtown Mall in commemoration of World Voice Day. We caught up with him to talk about the team's work.

Q. What is the UVA Voice Team? Who's on the team, and what are the team's objectives?

A. Our "Voice Team" is a division within the School of Medicine that is made up of different groups. We have our speech pathologists, who work with us in a real-time evaluation of patients. They're from the therapy services within the Health System. It's an ongoing collaboration, where we see patients and evaluate them together.

And then we have our whole research arm and educational arm, which includes the Curry School of Education and Human Development, and is training speech pathology students in their clinical program and giving them expertise in treating voice disorders, specifically. And then we have a science-research arm where we collaborate with biomedical engineering.

It's kind of neat. We've tried to bring in all the expertise that relates to voice throughout the University and try and put it in one spot to provide the best care for patients and cutting-edge treatment and education.

Q. What are some examples of voice disorders that you're trying to help people with?

A. There are things we characterize as overuse syndromes where you have a polyp, a nodule or a cyst on the vocal cord that results from patients with high vocal demands.

And then we have medical complications and surgical complications that result in voice problems. There are people who have had damage to the nerve that goes to the voice box as a result of thyroid or cervical spine surgery or even cancer. We try rehabilitating their voices as well.

Q. It seems like these problems and the work that you do flies below the radar.

A. Yes, absolutely. That's part of the reason we have this World Voice Day that we just celebrated. The whole purpose of that is to raise awareness about vocal health issues and the fact that we, as voice clinical professionals, can take care of patients who have problems with their voice. Patients aren't just limited to whatever their primary care can provide.

Q. What drew you to this facet of medicine?

A. There were a couple things. The first thing is that I am a big fan of music and, in particular, singers. I have a lot of respect for what they do in using their vocal instrument. The fact that we can make such incredible music without the addition of an instrument was fascinating to me.

And from a person who is very interested in science and biology, that combination was the perfect fit – being a doctor and a surgeon, as well as understanding the complexities of the physiology of voice. Putting those two things together was just the sweet spot for me.

Q. What are the UVA Voice Team's goals?

A. Right now, we're looking to expand our services and our access. One of the things we've come up against is there's a lot of demand for these types of services, but there aren't a lot of doctors, speech pathologists or ear, nose and throat specialists who have this focus.

The other thing we're excited to grow and develop is what I like to call "the tele-voice network." It stems from the ability to provide some of

these rehabilitation services through telemedicine. Patients who are coming from all over the state because of the limited access are able to get an evaluation here, and then not have to travel back and forth for treatment. They can do that through the tele-voice network that we're building.

Q. You alluded to the interdisciplinary nature of the UVA Voice Team. Is that one of the cooler aspects of the whole endeavor, the fact that these different experts across different fields can work together?

A. That's one of the most rewarding things about my job – to bring a different perspective together and have a discussion about each patient that we see. We all weigh in and determine what the best treatment protocol may be.

It's really fascinating. Sometimes we work independently to evaluate a patient and have completely different conclusions. But the group really is able to come together and decide on something that is in the patient's best interests. That's very unique. While I think I do a good job as a physician, I would certainly not be anywhere as good without my team.

Provided by University of Virginia

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