Title: Unusual Case of a Mucosal Bridge of the Vocal Cord

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A 26-year old female, non-smoker, presented to our Ear Nose and Throat Clinic, with nine months history of gradually worsening hoarseness and intermittent dysphonia. She had no other comorbidities. On examination with (flexible nasendoscopy) her vocal cords appeared relatively normal.

Due to the worsening nature of her voice she underwent (direct microlaryngoscopy). Inspection and palpation of her vocal cords discovered a discreet mucosal bridge along the margin of her left vocal cord (Figure 1). True vocal cords mucosal bridge is a rare benign finding can be unilateral or bilateral and cause dysphonia, it can be easily missed on (flexible nasendoscopy) in which the vocal cord will appear normal. It can cause a decrease of wave formation on laryngeal stroboscopy suggesting a vocal cord abnormality, but final diagnosis is based on (direct microlaryngoscopy) and instrumental examination of the vocal cords. Its etiology is unknown, it may have genetic cause, It can also present with a condition known as sulcus vocalis. There is no real consensus on optimal management of this condition, literature review suggests surgical excision, but conservative management under speech and language therapy is also recommended.

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