Conclusions: The development of this new multidisciplinary clinic for the management of children with complex breathlessness has resulted in improved clinical outcomes and satisfaction for patients with vocal fold dysfunction.

OBJECTIVES

Often paediatric patients with vocal fold dysfunction can have a delay in their diagnosis and management. Often these patients will be misdiagnosed with conditions such as asthma. Therefore we set up a new ‘complex breathlessness’ multidisciplinary clinic for these patients involving paediatric respiratory physicians, paediatric ENT surgeons and paediatric respiratory physiotherapists. The aim of our study was to determine the usefulness of setting up a new clinic for complex breathlessness in the paediatric population.

METHODS

Prospective review of children presenting to the complex breathlessness clinic at Alder Hey Children’s Hospital during an 8-month period (May - December 2017). Evaluation of patients was made using the Nimjegeen Questionnaire (out of 60) and PEDSQL (paediatric quality of life) Questionnaire (out of 28) on presentation to clinic and 4 months post clinic.

RESULTS

Nineteen patients attending the clinic were evaluated (16 females and 3 males). The median age was 14 years (range 10-18 years). Five patients were diagnosed with paradoxical vocal fold movement and have not had any further episodes since treatment. The mean Nimjegeen score pre-intervention was 36.4 and reduced to 16.2 post-intervention (p<0.001). The mean PEDSQL score pre-intervention was 16.8 and increased to 22.3 post-intervention (p=0.01). Seventeen patients (89%) have been successfully discharged with resolution of their symptoms, and two patients have been referred to psychiatric services for further management.

 Corresponding author:
Sunil Sharma
Department of Paediatric ENT Surgery, Alder Hey Children’s Hospital, Eaton Road, Liverpool. L12 2AF.
Email: sunilsharma@doctors.org.uk

Alder Hey Children’s
NHS Foundation Trust