A complete laryngotracheoesophageal cleft (LTOC), where there is no remnant of the trachea-oesophageal septum (TOS), currently has limited surgical options and is therefore usually incompatible with life. We propose to classify this entity differently from type IV clefts with a TOS, where reconstruction can still be attempted; renaming LTOC with TOS as type IVa and without TOS as type IVb.

We present a case series of three patients who were born with a complete LTOC without a remnant of TOS and abnormal carina and main bronchi. In all cases, the decision was made to withdraw treatment and patients died shortly after.