Hamartoma is defined as a growth of mature normal cells and tissues endogenous to the site of development with wrong proportion and abnormal tissue architecture.

Although it may occur in any organ, is uncommon in head and neck region.

The symptoms depend on the mass location. In the larynx, airway obstruction is the most frequent presentation and its present most frequently in early years.

Management consists of surgical excision with no recurrences if the mass removal is complete.

**Objective**

To report a unique case of obstructive laryngeal hamartoma diagnosed in an old boy without symptoms for years.

**Method**

We present a fifteen-year-old boy who was referred to emergencies because of difficulties to breathe in some positions in the last days and progressive voice changes and swallow problems.

**Results**

The laryngoscopy shows a big supraglottic mass that was confirmed in the tomography and MRI.

Thomography shows a solid mass centered on the epiglottic region with posterior and inferior growth toward the hypopharynx conditioning severe stenosis of the airway.

Voluminous mass (46×13×33mm) dependent on the right aryepiglottic fold with a mixed fatty component and another mesenchymal aspect.

Scoped assisted oral intubation was possible without doing a tracheostomy. The mass was excised under general anaesthesia with good results. No dysphagia and swallow problems after surgery were present. Histopathology revealed a mixture of different tissues consistent with hamartoma.

We are discussing about possible advantages with TORS and Da Vincy assisted surgery to obtain better exposure in similar future cases.