

# Laryngeal tuberculosis in medical practice

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**Conflict of interest:** none

**BACKGROUND.** Laryngeal tuberculosis (LTB) is a rare but clinically significant form of extrapulmonary tuberculosis that is often associated with diagnostic challenges due to the nonspecific nature of its clinical manifestations and the considerable polymorphism of its endoscopic appearance.

**OBJECTIVE.** To summarize current scientific evidence regarding the epidemiology, clinical manifestations, diagnostic features, and differential diagnosis of LTB.

**MATERIALS AND METHODS.** Object of the study is LTB as a form of extrapulmonary tuberculosis. A literature search and analysis were conducted using scientific publications indexed in the PubMed, Embase, and Cochrane Library databases. The search included the keywords “laryngeal tuberculosis,” “tuberculosis of the larynx,” “larynx,” “upper airway tuberculosis,” and “extrapulmonary tuberculosis” and covered studies published within the last 10 years.

**RESULTS.** LTB most commonly develops as a result of bronchogenic spread of infection in patients with pulmonary tuberculosis; however, isolated laryngeal involvement may also occur. The most characteristic clinical manifestations are dysphonia, dysphagia, and odynophagia. Laryngoscopic findings are highly variable and frequently mimic laryngeal malignancies. Diagnostic confirmation requires a comprehensive approach, including laryngoscopy and histological, microbiological, and molecular genetic investigations. Particular diagnostic challenges arise in isolated paucibacillary forms of the disease.

**CONCLUSIONS.** LTB should be included in the differential diagnostic workup of patients with persistent laryngeal disorders. Timely comprehensive diagnosis and early initiation of antimycobacterial therapy can prevent the development of irreversible structural and functional changes of the larynx.

**KEY WORDS:** extrapulmonary tuberculosis, laryngeal tuberculosis, diagnostics, differential diagnostics.