



# IALP Insights: Voice and Voice Disorders

*Empower Your Voice*

*This IALP Insights (version 1.0, 2025-10-06) is prepared by Maria Dietrich and Debra Phyland (IALP Voice Committee), with the artwork prepared by Rachel Chan (Student member of the IALP).*

1

The vocal folds are delicate and are no longer than a thumb's fingernail in females. They serve speech and non-speech functions and excel when used by vocal athletes such as singers.

2

One in three people will have a voice disorder in their lifetime. They are more common in women than men and can severely impact quality of life.

3

Occupational voice users such as teachers, customer service/salespeople, and performers are three times more likely to have a voice disorder than people who speak little for their jobs.

4

Healthy voice use and proactive care in the workplace are essential for reducing the risk of vocal injury.

5

Most voice disorders are reversible and should be treated as early as possible by speech-language therapists specialised in voice and voice doctors to optimise outcomes. Vocal rehabilitation is an important part of recovery and carries no stigma.

6

Your general well-being impacts your vocal well-being. Taking good care of your physical and mental health keeps your voice resilient for your personal and professional life.



## Overview of Voice Disorders

Voice disorders are conditions that change the normal sound of our voice. They may cause the voice to become hoarse, strained, weak, effortful, or less reliable. These changes often result from vocal overuse, misuse, or underlying medical conditions affecting the vocal folds. Voice disorders are common during the lifetime and can significantly impact communication, emotional well-being, occupational performance and quality of life. Individuals in voice-intensive professions—such as teachers, actors, singers, and customer service workers—are at heightened risk, with many work-related voice injuries remaining underrecognised and untreated. Contributing factors include prolonged voice use, inadequate recovery time, and speaking in noisy environments. Early assessment, prevention, and targeted voice therapy are key to reducing long-term consequences and supporting vocal health.

# Voice Disorders in Numbers



The vocal folds are about **10 mm long** in females and **17 mm long** in males.<sup>1</sup> Varying layers of tissue cover the vocal fold muscles that allow the vocal folds to vibrate during voice production. In females, they vibrate about **200 times per second** and in males **120 times per second**.<sup>2</sup> Biomechanical stress on the vocal folds, sustained and loud voice use, systemic dehydration, and uncontrolled inflammation in the vocal folds negatively affect vocal fold health.<sup>3</sup>

About **30%** of the workforce rely on their voice to do their job.<sup>4</sup> Since there are approximately **3.6 billion** workers in the global workforce, this equals over **1 billion** people worldwide. Voice disorders are common and vary depending on the population as follow:

- The lifetime prevalence of voice disorders in the general population worldwide ranges between **12-36%**<sup>5-10</sup> and the prevalence at a moment in time (point prevalence) between **5-13%**.<sup>5-6,9-10</sup> In comparison, the lifetime prevalence of voice disorders among schoolteachers worldwide was found to be a staggering **63%** and the point prevalence **38%**.<sup>11</sup>
- Primary muscle tension voice disorder is common (**10-40%**)<sup>12</sup> and so are related voice symptoms such as vocal effort and vocal fatigue. For example, between **18-33%** of teachers experience vocal fatigue.<sup>13,14</sup> Laryngeal pathologies such as vocal nodules and vocal polyps are also common at a rate of **22-34%** in individuals seen at a voice center.<sup>15</sup>
- In children and adolescents, the lifetime prevalence of a voice disorder was determined to be **12%** and **24%** respectively and the point prevalence **7%**.<sup>16,17</sup>
- In older adults, the lifetime prevalence was found to be between **5-30%** across studies.<sup>18,19</sup>
- The lifetime prevalence of dysphonia in singers was **46%** based on a systematic review.<sup>20</sup>

The **Global economic impact** of lost productivity due to voice disorders is considerable. Data from Australia, Columbia, Finland, and the United States indicate that teachers' lost work days due to voice problems ranged between 1-3 days per year<sup>21-24</sup> with an increasing trend.<sup>24</sup> Teachers with a history of voice problems during student teaching or early in their career have an almost nine-fold greater chance of developing a voice disorder compared with teachers who did not have voice problems during student teaching.<sup>25,26</sup> The cost associated with treating people with laryngeal disorders is comparable to that of treating chronic diseases.<sup>27</sup>

## Vocal injury prevention

involves active risk management at the workplace, habilitation, and rehabilitation.<sup>28</sup> Proactive occupational health practices and programs to care for the voice are critical in maintaining a healthy and resilient voice. Such programs however need greater adoption and implementation worldwide.<sup>28-30</sup>



## What are Common Voice Disorders and When Should I Seek Help?

Many voice disorders are common and should be assessed quickly by a specialised professional if they persist. For example, if hoarseness (dysphonia) persists for 4 weeks<sup>31</sup> outside of an upper respiratory infection, then the person should see a medical professional for a laryngeal exam. A voice disorder can have many reasons. Broad categories most relevant to occupational voice users are:

### Organic Voice Disorders

- **Structural:** e.g., abnormalities of the vocal fold tissue such as vocal fold nodules, a vocal fold polyp or a vocal fold cyst
- **Inflammatory:** e.g., laryngopharyngeal reflux
- **Neuromuscular:** e.g., vocal fold paralysis
- **Trauma:** e.g., injury to the laryngeal framework

### Muscle Tension Voice Disorders

- **Primary:** malregulated vocal function leading to inefficient voice production
- **Secondary/adaptive:** To underlying primary aetiology

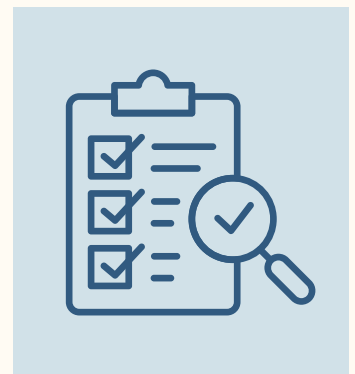
### Functional Voice Disorders

- **Aphonia/Dysphonia:** involuntary loss of motor control for voice production (formerly called psychogenic, now explained as functional movement disorder under the umbrella of functional neurological disorders)
- **Puberphonia:** mutational falsetto in adolescent or mature males



## Who can Examine and Treat me?

A state-of-the-art voice examination is done by physicians and speech-language pathologists who perform complementary exams. Physicians specialised in voice (e.g., laryngologist or phoniatician; alternatively head-and-neck surgeon or ear-nose-and-throat doctor specialised in voice) diagnose vocal pathologies and voice disorders using specialised cameras to examine the larynx using a videostroboscopy. Speech-language pathologists (also called speech-language therapists, speech therapists, or logopaedists) will assess the voice using perceptual and objective measures. In some countries, this may include videostroboscopic evaluation of voice.



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# Self-care and Prevention of Voice Problems Throughout the Lifespan



**1** Decrease voice use and allow your voice to recover if you have throat discomfort or hoarseness before returning to heavy vocal use. If symptoms still persist, seek help from a healthcare team.

**2** Hydrate well throughout the day and eat a well-balanced diet.

**3** During times your voice is fatigued or when you are fighting a cold, consider supplementing hydration with steam inhalation and nebulizers using isotonic saline and nasal rinses as needed. A humidifier may be helpful in the bedroom.

**4** Do listen to the sound and feel of your voice. Do not speak louder than necessary and give your voice rest when it starts feeling tired. Voice smarter not harder.

**5** Gentle humming and lip trills with pitch glides are easy warm-ups and cool-downs for your voice.

**6** Some medications including some allergy, asthma, or antidepressant medications may dry the throat. Be prepared and hydrate more than usual and keep the throat moist.

**7** Singing keeps the vocal folds agile throughout the life span.



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## How the IALP Voice Committee Advocates for Voice Care Around the World

- Featuring [Jayme-Lee journey through vocal rehabilitation](#) in cooperation with the WHO.
- State-of-the-art presentations and workshops, for example, on vocal injury, vocal fatigue, occupational voice care, and vocal congruence and gender affirmation at the IALP Congress
- Webinars on voice disorders and voice care
- Collection of self-report voice assessment instruments in different languages
- “IALP Insights: Voice and Voice Disorders” - Empower your Voice
- Awareness campaigns around World Voice Day

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## Resources

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<https://www.asha.org/practice-portal/clinical-topics/voice-disorders/?srsltid=AfmBOorIpoWI38wVxnz2mmFHLUZaB8gPVmb-rdv8Htns6mWf-NY1gL7U>

<https://www.rcslt.org/speech-and-language-therapy/clinical-information/voice/>

[https://www.communicationhub.com.au/CommunicationHub/Communication\\_Hub/Resources/Fact\\_Sheets/Voice\\_disorder.aspx](https://www.communicationhub.com.au/CommunicationHub/Communication_Hub/Resources/Fact_Sheets/Voice_disorder.aspx)

<https://www.entnet.org/resource/aao-hnsf-updated-cpg-hoarseness-press-release-fact-sheet/>