

OUTCOMES OF A COMBINED SPEECH PATHOLOGY/ENT CLINIC TO OPTIMISE CARE FOR PATIENTS WITH DYSPHONIA



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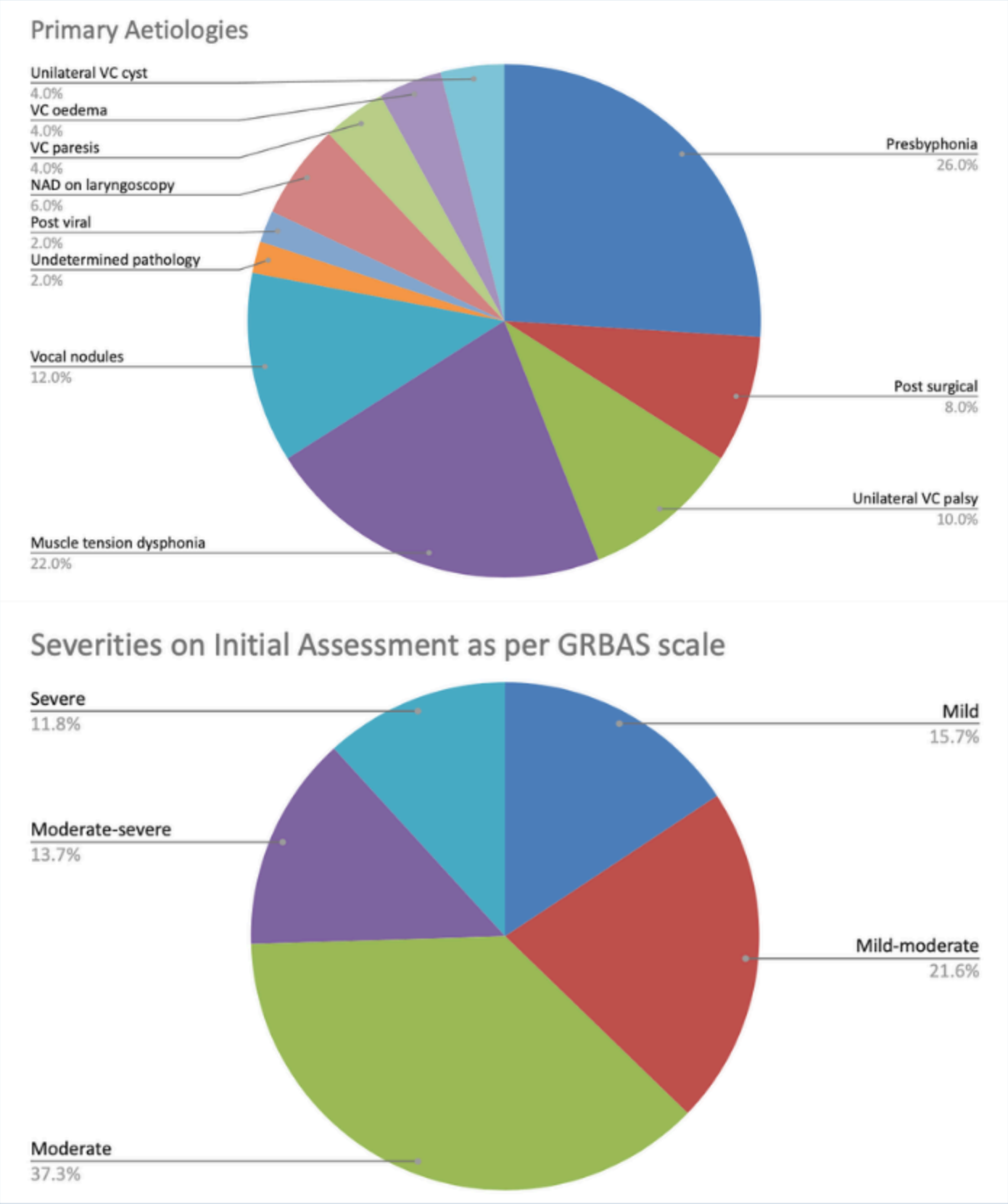
Introduction

Joint ENT/Speech Pathology management of patients with dysphonia is widely regarded as gold standard. Despite this, most private ENTs and Speech Pathologists work separately, and to this author's knowledge no studies have directly looked at the advantages and disadvantages of an in-rooms joint SP/ENT clinic.

This study evaluated the impacts of introducing a voice specialised Speech Pathologist in a private regional ENT clinic.

Participants

79 participants with a wide range of aetiologies and severities, managed under the same ENT and Speech Pathologist

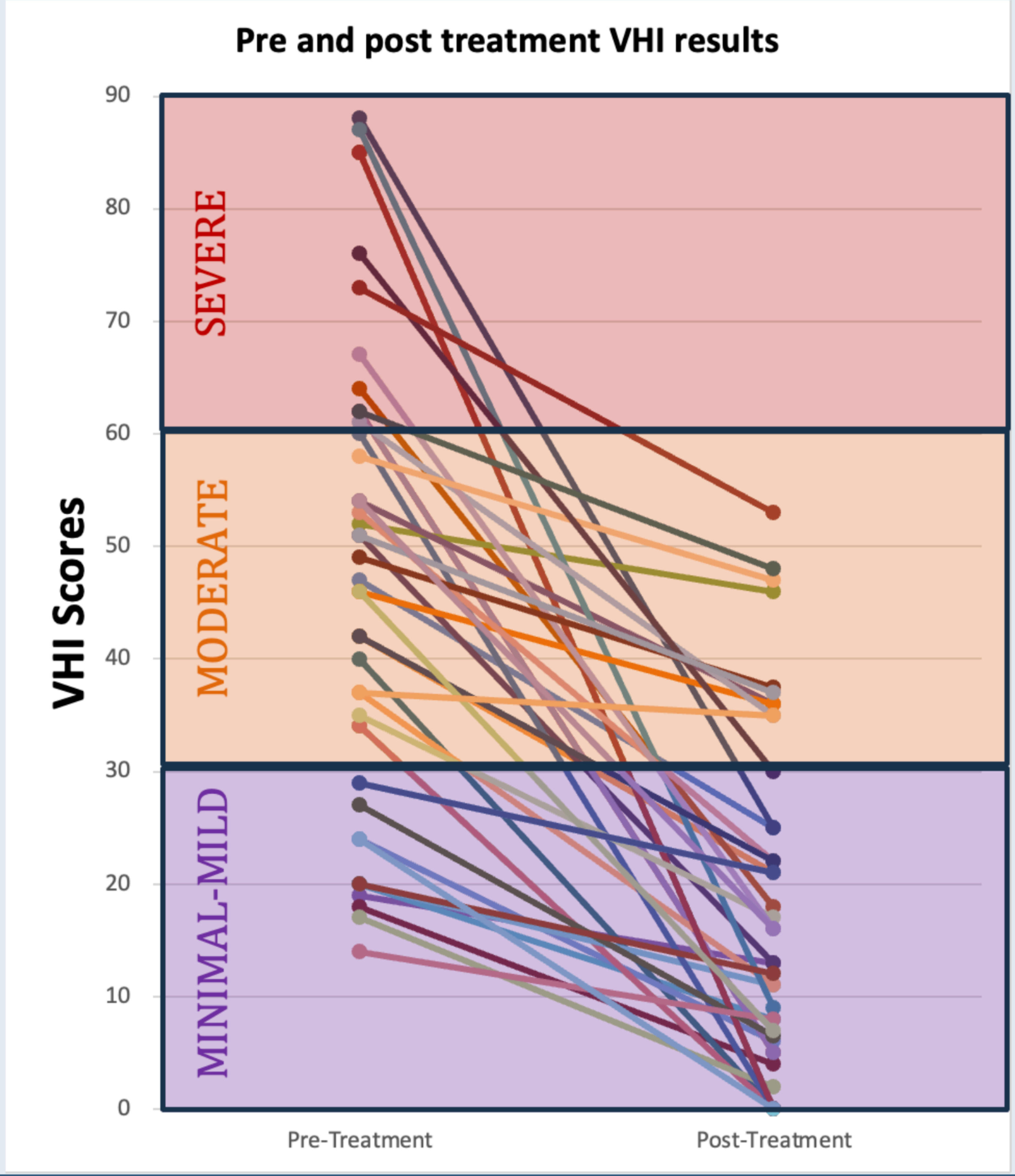


Outcome measures

- Wait times
- Costs to patient
- Overall voice outcomes (pre & post therapy Voice Handicap Index results)
- Number of therapy sessions
- Dropout rates
- Clinician reported advantages and disadvantages.

Results

Measure	Outcome
Patient wait times	Mean 163 day reduction for patients booked in via the joint SP/ENT pathway compared to the traditional ENT pathway
Cost to patient	38% reduction
Pre & post therapy Voice Handicap Index (VHI) scores	Mean reduction of 28.86 points
Drop out rate	35% - comparatively lower than rates reported in the literature i.e. 65% (Harper, et al., 2009)
Mean no. of therapy sessions per patient	2.31 sessions - comparatively lower than the literature i.e 10.87 sessions reported in a review of 93 publications from Europe and North America between 1975 and 2013 (Bodt et al, 2015)
Staff reported outcomes	(n = 3, 5-point Likert) showed strong endorsement of the model's advantages (mean 4.93, median 5) and overall value (mean 4.89, median 5).



Conclusion

The results of this study support in-rooms Speech Pathology and the use of a joint ENT/SP assessment pathway to optimise care for patients with dysphonia in private ENT clinics.

Future Directions

Future research on factors influencing dropout rates, ways to further minimise private costs to patient (e.g. group therapy), patient suitability for the joint SP/ENT assessment model, and prevention programs may help to further optimise care for these populations.

References

1. Bodt, M., Patteeuw, T & Versele, A (2015) Temporal Variables in Voice therapy. 29 (5): 611-617
2. Harper, E., Portone-Maira, C., Johns, MM. (2009) A study of voice therapy dropout.23 (3): 337-40.



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