

Celebrations of the 50th Anniversary of Collegium Medicorum Theatri

FONIATRIA ARTISTICA INTERNAZIONALE

Sessione dedicata al 50° anniversario del Collegium Medicorum Theatri (CoMeT)

Chairman: Franco Fussi, Eugenia Chavez Calderón

SPEECH BY THE HONORARY PRESIDENT

Opening Speech :

“Is the voice doctor a networker or a lone wolf behind the seven hills?”

Joseph Schloemicher-Their

Austrian Voice Institute

Professional singers typically work under circumstances of physical and emotional stress. The physical Stressors consists of much traveling, late-night working hours, the unpredictability of venues, lack of sleep, and irregular diet. Emotional stressors includes : constant competition, lack of financial security, strained interpersonal conflicts. There is often the situation of complaining of hoarseness, but with a background of recent transatlantic travel, jet lag, the stress of a recent indifferent performance and a body full of ingested and injected medications from various well-meaning physicians in other cities, with poor medical reviews. Therefore a worldwide network of Voice-doctors and Therapists with high competence and secrecy like in the Collegium medicorum Theatrie and other Cooperations are very important to give a trusting support to the Singers in cooperation with the colleagues in the international arena.

Questions:

What are the most **physical Stressors** for Singers:

A: much traveling

B: lack of financial security

C: irregular diet.

D: strained interpersonal conflicts

Abstract: **The condition of singers at the various work stages of international festivals**

Joseph Schloemicher-Thier

The voice specialist's primary concern is to protect his patients and to retain their trust., He has to do his best to gain the confidence of both sides and has to focus on different occupational circumstances at the various work stages of an international festival, like the Salzburg Festival. Therefore a Cancellation policy is important, and has sometimes severe consequences in the opera and festival business, He must also act as a mediator between the singers and the director of the opera house or festival. There are absolute indications for cancellation, and relative indications of a possible cancellation, perhaps entailing an alteration of the performance: The motto here is: "The show must go on and save the singer's fee, but avoid health risks."

What is the most important Role of Voice Specialist on Stage:

- A: to be a mediator of both sides
- B: to know the different occupational circumstances
- C: To be the chief doctor for the Festival Management
- D: To interact only with the manager of the singers

Inspiratory phonation and singing (ethnomusicological, physiological, and acoustic aspects)

Physiology and acoustics of inhaling voice

Philippe DeJonckere

Inspiratory phonation (IP) means phonating with inspiratory airflow. Some vocalists remarkably master this technique, to such an extent that it offers new dramatic, aesthetic, and functional possibilities in singing specific contemporary music. The basic physiological mechanisms are comparable in both voicing modes, inspiratory and expiratory, although with

specific differences. IP is characterized by (1) an inversion of the mucosal wave, (2) a smaller closed quotient, (3) a larger opening/closing quotient with the additional difference that in IP, the quotient is larger than 1 (opening slower than closing), whereas it is less than 1 in expiratory mode (opening faster than closing), (4) a larger vocal-fold excursion, (5) higher values of adaptive normalized noise energy, and (6) a steeper slope of harmonic peaks in IP. IP is actually to be considered as an “extended vocal technique,” a term applied to vocalization in art music, which falls outside of traditional classical singing styles, but with remarkable possibilities in skilled vocalists.

Indirect surgery and artistic voice rehabilitation .

Chirurgia indiretta e riabilitazione della voce artistica

R.Eugenia Chavez Calderon

Introduction

The development of the indirect endoscopic phonosurgery with the new equipments and instruments has increased in the last years.

The use since the 80's from the rigid endoscopes 70 and 90 degrees , with recordings systems, HD cameras and the use of stroboscope aloud the indirect phonosurgery to have enlargement from the images and the functional advantages. There are new phonosurgical instruments that are being used. The most important advantage is to view the function under stroboscopy during the surgery. This possibility helps for a better functional result. All vocal fold pathologies can be surgically treated indirectly like Reinkes oedema, benign and malign tumors, injection or supraglottal pathology . Rehabilitation of the artistic voice in speaking and singing functions before and mainly after phonosurgery is of great importance.

Method

Each patient needs blood tests and cardiovascular examination. An anesthesist perform intravenous sedation and the phonosurgeon applies local anesthesia in the tongue, pharynx and larynx. The patient is awake, in a sitting position.

Results

in a group of 3,000 patients were operated indirectly

75% cases with benign tumors

15% cases malign tumors

15% cases injection

40% Reinke's oedema

Some cases had two different lesions.

Rehabilitation programs included resonance, placement, semiocluded exercises and dynamic routines for reinforcement of the artistic voice mechanism.

Discussion

The indications of indirect endoscopic phonosurgery are for all laryngeal pathologies and it is a great tool for patients with heart, pulmonary alterations, risks for general anesthesia metabolic disorders, maxillofacial and pharyngo-oral difficulties such as mouth opening, teeth malformations, shortness of the neck, limitation for head hyperextension, thickness of the tongue, or narrow pharynx. In degenerative lesions like papillomatosis or cancer the indirect phonosurgery is useful. The mucosal wave movement during surgery permits a stroboscopic control in all registers, volumes and during singing. Biopsies from a supraglottal lesions can be obtained. The correct treatment of the free edge is easier to control with this indirect approach. Under stroboscopic light the phonosurgeon can decide different manoeuvres as planned with freedom in the larynx and vocal folds.

Rehabilitation for artistic voice is based in the residual capacities before surgery and after phonosurgery the complete speaking and singing voice mechanisms have to be improved. It begins with breathing support, humming, resonance, fricatives semiocluded exercises and dynamic routines for body movements during phonation and reinforcement of the artistic vocal mechanism.

Conclusion

Every patient can be operated by this technique.

There are cases that have all the advantages with indirect endoscopic procedure to perform a correct phonosurgery.

The phonosurgeon can have functional information during the procedure.

The cost advantages and less general anesthesia and intubation risks are important factors.

Rehabilitation of artistic voice needs a complete program to improve and recover the functions for all the expressions of artistic voice

Professional singers with vocal cord disorders

Bruno Coulombe

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Hospitalier Universitaire de Lyon. Associé avec le Docteur Romain PEROUSE, phono-chirurgien, il a organisé à six reprises un cours de phono-chirurgie à la Polyclinique des Minguettes (VENISSIEUX - France).

It is quite common to discover an uni- or bilateral cordal abnormality in a professional singer, especially in the field of pop music, but also lyrical. Often, it is a moment that can be very difficult for the singer, and take him (her) to a vital question: "may I continue or not my career?".

The aim of this presentation is to show that, although we know that in some cases surgery will be required to solve an impossibility of singing professionally, there are situations in which a cordal abnormality may constitute a part of the voice and the vocal timbre of the singer. In such circumstances, we should as much as possible consider the anomaly observed as a "normal" aspect for that singer, and try to find with him (her) the vocal and physical balance to lead his (her) career as well as possible.

1. In a professional singer in activity, its possible to find during the laryngeal examination ?

- a. An intracordal cist
- b. One or two thickening on the free border of the vocal folds
- c. A cicatricial aspect
- d. A furrow (sulcus) of one or both vocal folds
- e. None of the previously described lesions

2. In a professionnal singer :

- a. Both vocal folds have to be absolutely normal
- b. You may find small vocal fold abnormalities without any unacceptable acoutic consequences
- c. Important vocal folds abnormalities may sometimes be observed
- d. An annual laryngeal examination should be done
- e. A singer career is not feasible if vocal folds abnormalities do exist.