Vocal Cord Dysfunction (VCD) is not an ENT problem only. In practice, we find some patients of respiratory infections or allergy (asthma patients), who develop VCD and get attacks of choking and breathing difficulty, often at night. These attacks can frighten the patient (feeling of impending death), the relations and even the doctor. The voice may be affected and constant sticky secretions in vocal cord area are a nuisance. On top of this, many patients develop 'functional' and hysterical V.C. D.!!

How do we diagnose this condition? Ask for Pulmonary Function Test (P.F.T) from a respiratory department of a hospital (certainly not health check up centres, who always make a lot of money from routine P.F.T).

A good spirometry can diagnose “upper” respiratory obstruction, whether organic or functional. From the ‘Flow Volume Loop”, the pulmonologist and a very good technician can pick up such obstructions.

During the investigation of Laryngoscopy, adduction of vocal cords on inspiration and expiration is diagnostic of 'psychogenic' VCD. Though the treatment and management of this condition is very difficult, there is no use of increasing the dose of medicines of asthma and infections, resulting in side effects.

Finally of course, passage of time is the best treatment. All of them recover after a few days or weeks, during which time they go on changing doctors and specialists!

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**NON SURGICAL TREATMENT OF CARPAL TUNNEL SYNDROME**

The superior efficacy of surgery in today's report and the previous surgery-versus-splinting trial should not necessarily imply that, in patients with moderately severe carpal tunnel syndrome, physicians should always advocate surgery without initial non-surgical treatment.

Initial non-surgical treatment has advantages. It is appropriate when symptom duration is short and diagnosis is less certain. Potential surgical complications are avoided even though serious ones are uncommon. Surgery can be followed by prolonged work disability. Persistent pain in the proximal palm 5 years after surgery has been reported in 6%. Although uncommon, recurrence after surgery can be difficult to treat.