

## Laryngeal and Hypopharyngeal Cancer

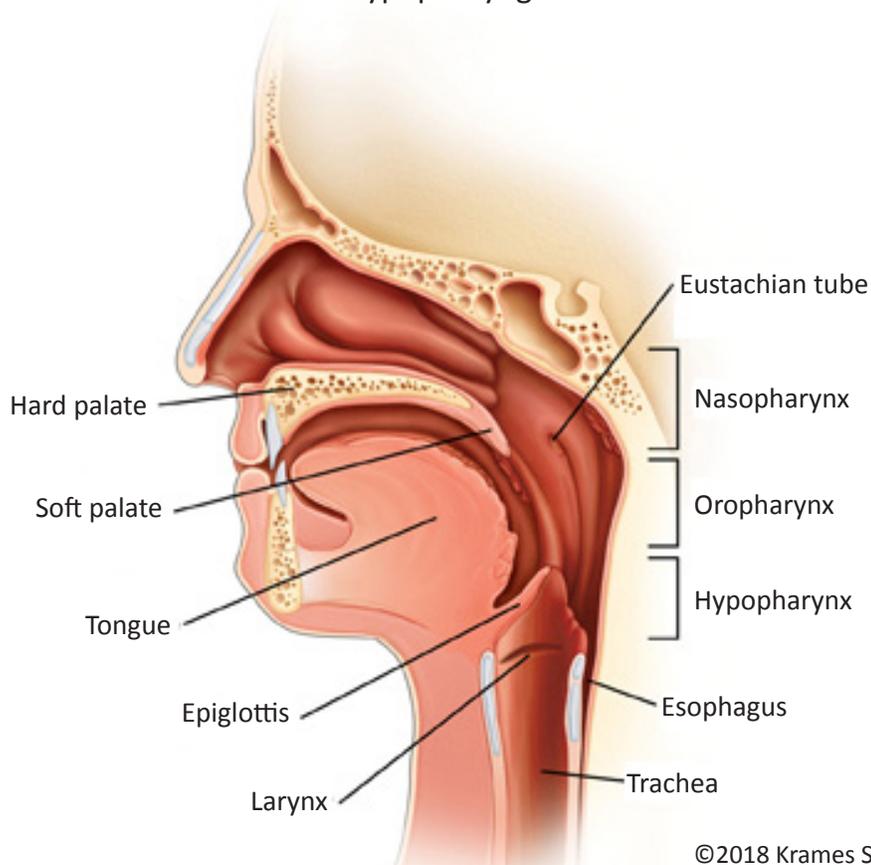
### What is laryngeal and hypopharyngeal cancer?

*If you have any questions, please ask your nurse or physician.*

The larynx and hypopharynx are in the lower throat. The larynx, or voice box, is the organ that produces the voice. It has a rigid, outer covering made up of cartilage. The vocal cords within it vibrate to produce sound.

The larynx is divided into 3 regions. The vocal cords are located in a part of the larynx called the glottis. The part of the larynx above the vocal cords is called supraglottis, while the portion below is called subglottis. Cancer can arise from the vocal cords (glottic cancer), above the vocal cords (supraglottic cancer) or below the vocal cords (subglottic cancer). The clinical behavior and prognosis of these types of cancer can be different.

The hypopharynx is behind the larynx and is the entrance to the esophagus (tube that connects to your stomach). Cancers that start here are called hypopharyngeal cancers.



## **What causes laryngeal and hypopharyngeal cancer?**

Smoking and heavy alcohol intake are the most common causes of laryngeal and hypopharyngeal cancer. While most patients with this cancer have a history of smoking, laryngeal cancer can develop, on rare occasions, in people who have never smoked or consumed alcohol.

## **What are the symptoms?**

Some common symptoms of laryngeal and hypopharyngeal cancer include:

- Hoarseness or change in the quality of the voice
- Sore throat that does not go away
- Pain and/or trouble swallowing
- Difficulty breathing
- Lump in the neck
- Ear pain

## **How is laryngeal and hypopharyngeal diagnosed?**

An evaluation by a head and neck surgeon is required to accurately outline the extent of cancer. The physician will examine the inside of your nose with a thin, flexible scope (fiber-optic endoscope). This shows the location and extent of tumor within the voice box.

A biopsy is a procedure in which a small piece of tissue is removed from the tumor to check the type of cancer. This will usually be done in the operating room under anesthesia. Another type of biopsy is a fine needle aspiration (FNA) in which tissue from neck lymph nodes is removed through a thin needle. The tissue is then examined under the microscope. An ultrasound is often used to direct the needle precisely into the lymph node. An FNA is done in the surgeon's office.

Imaging studies including a CT scan and a PET scan may be ordered to obtain a clearer picture of the tumor size and location. The scans will also look for any spread of disease into the lymph nodes, lungs or bones.

Patients will also need an evaluation with a speech and swallowing specialist to check swallowing ability and problems. A modified barium swallow (MBS) test may be needed to further check for swallowing problems.

## Resources:

[www.cancer.gov/publications/patient-education/wyntk-larynx](http://www.cancer.gov/publications/patient-education/wyntk-larynx)  
[www.cancer.gov/cancertopics/pdq/treatment/laryngeal/Patient](http://www.cancer.gov/cancertopics/pdq/treatment/laryngeal/Patient)

For more information, please contact:

Head and Neck Multidisciplinary Clinic at Northwestern Memorial Hospital  
Galter Pavilion, 675 North Saint Clair Street  
Suite 15-200  
Chicago, Illinois 60611  
Phone: 312.695.8182  
Fax: 312.695.6298

## Northwestern Medicine – Health Information Resources

For more information, contact Northwestern Memorial Hospital’s Alberto Culver Health Learning Center (HLC) at [hlc@nm.org](mailto:hlc@nm.org), or by calling 312.926.5465. Health information professionals can help you find the information you need and provide you with personal support at no charge.

For more information about Northwestern Medicine, please visit our website at [nm.org](http://nm.org).

*Para asistencia en español, por favor llamar al Departamento de Representantes para Pacientes al 312.926.3112.*

The entities that come together as Northwestern Medicine are committed to representing the communities we serve, fostering a culture of inclusion, delivering culturally competent care, providing access to treatment and programs in a nondiscriminatory manner and eliminating healthcare disparities. For questions, please call either Northwestern Memorial Hospital’s Patient Representatives Department at 312.926.3112, TDD/TTY 312.926.6363 or the Northwestern Medical Group Patient Representatives Department at 312.695.1100, TDD/TTY 312.926.6363.

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