



Woman, Child and Family Service - Paediatrics
Tauranga Hospital
Cameron Road Private Bag 12024
Tauranga NEW ZEALAND

Referral re: Stridor and possible Laryngomalacia.

Thank you for your referral regarding laryngomalacia.

Laryngomalacia is the commonest cause of stridor in this age group. It is a congenital condition involving the tissue of the larynx above the vocal cords. In laryngomalacia this tissue is floppy and falls over the airway opening, partially blocking it. The exact cause of laryngomalacia is unknown.

Laryngomalacia can present at birth or within the first few weeks of life. It is not uncommon for the noisy breathing to get worse before it improves, usually around 4 to 8 months of age. In most cases laryngomalacia is not a serious condition and resolves by the time children are 18 months of age. The stridor is often noted to be worse when the baby is active or upset.

Laryngomalacia can be presumptively diagnosed by history and physical examination without further investigation.

Most children with laryngomalacia don't require any medical intervention. Some children with laryngomalacia have gastroesophageal reflux and medication can be considered.

If the child has any of the following symptoms, please discuss it with the on-call paediatrician in Tauranga Hospital:

- Marked stridor at rest
- Associated increased work of breathing, apnoeas or colour change
- Experiencing difficulties with feeding or weight gain as a result of his/her stridor

Ngā mihi

Yours sincerely

Electronically checked and approved

Paediatric Team