

LARYNGOMALACIA

What is Laryngomalacia?

Laryngomalacia is a common cause of persistent noisy breathing during infancy, known as 'stridor'. This noise is caused by the partial collapse of the soft (immature) structures of the upper airway (the larynx) when air moves through. There are likely multiple factors that cause this condition.

Stridor is best described as a low-pitched "wet" noise with every inward breath, that may vary in loudness. Noise with breathing out (or both inward and outward air movement) is very likely due to another cause.

The stridor is typically loudest at four to eight months of age and most often resolves by 18 months. It may be more noticeable during feeding or sleeping and may disappear completely when crying. It is often louder when infants are lying on their back and can worsen with infections.

Does it need treatment?

If an infant has mild laryngomalacia, they typically breathe and feed well but can have periods of noisy breathing. Infants with severe laryngomalacia may have signs they need to use extra muscles to breathe (work of breathing), feeding and weight gain problems, and sleep disturbance.

An experienced doctor can diagnose mild laryngomalacia and monitor it regularly. Most infants do not require further referral or imaging. Infants with worsening noisy breathing, hoarseness, pauses in breathing, episodes of discolouration (gray or bluish colouration) or feeding and growth problems may require urgent assessment or evaluation by an Ear, Nose, and Throat Specialist.

Most infants typically have very stable symptoms that improve gradually over time. Sudden illness such as respiratory infections, vomiting or fevers can worsen symptoms. If you have concerns about breathing changes such as: breathing pauses, difficulty feeding or changes in breathing pattern present to medical care immediately. If you are concerned that your infant is having difficulty breathing or you are unable to assess the urgency of your concern, call 911.