Post-operative complications

-PROSTHETIC LARYNGOPLASTY

  Immediate post-operative problems, such as dysphagia, seroma formation, wound infection and sudden loss of arytenoid abduction.

 Longer term complications include gradual loss of arytenoid abduction, chronic coughing, arytenoid granulomas and dynamic upper airway collapse unrelated to RLN such as palatal dysfunction, and aryepiglottic fold or vocal fold collapse

Amount of abduction achieved at surgery may reduce due to the suture stretching or pulling through the muscular process of the arytenoid or through the cricoid cartilage. The risk of this may be higher in younger horses with immature cartilage. Over abduction may result in a higher incidence of coughing and feed aspiration.

­-VENTRICULOCORDECTOMY

 Prolonged incision healing time, laryngeal swelling necessitating tracheal intubation, laryngeal swelling, granuloma formation, and arytnoid chondrosis (an uncommon acquired condition of the horse's larynx that leads to airway obstruction), mainly noticed with the laser-assisted technique; and latent thermal damage when the laser is used.

 Surgical complications are fewer and more-rare compared to the prosthetic laaryngoplasty

-LARYNGOHYOID REDUCTION

 Dysphagia, seroma formation, wound infection, nasal discharge, coughing and feed aspiration are the few more common surgical effects of the laryngohyoid reduction. These clinical signs are seen more in cases where the surgery failed