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Supraglottic Laryngitis in COVID-19

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Introduction

A 44-year-old male, non-smoker, with no previous medical comorbidities, presented to the otorhinolaryngology department with 3 days history of severe sore throat, acute odynophagia, fatigue, and poor oral intake. Oral examination revealed no abnormality in his oropharynx. However, the laryngofiberscopic findings showed erythematous and white coating from the epiglottis laryngeal surface of the epiglottis to the arytenoid and pseudo vocal folds. There was no sign of epiglottic edema nor upper airway obstruction. Laboratory studies showed a white blood cell count of 9,600 per cubic millimeter (reference range, 3,300 to 8,600) and a C-reactive protein level of 5.15 mg per microliter (reference range, 0 to 0.14). He was later tested positive via a RT-PCR. His COVID-19 symptoms included fever, acute odynophagia, and severe sore throat, which are common CO-VID-19 manifestation of the Omicron variant. The patient was treated with acetaminophen. On day 5, he had shown clinical improvement.



Figure 1: The laryngofiberscopic findings showed erythematous and white coating from the laryngeal surface of the epiglottis to the false vocal cords.



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