



MLTB - Micro-laryngo-tracheo-bronchoscopy

ABOUT THE CONDITION

What is an MLTB?

MLTB is short for micro-laryngo-tracheo-bronchoscopy. It is a procedure to find out what is causing your child's airway symptoms. An instrument called an endoscope, with a light and camera at the end, is inserted through the mouth to look at their voicebox (larynx), windpipe (trachea) and large tubes to their lungs (bronchi).

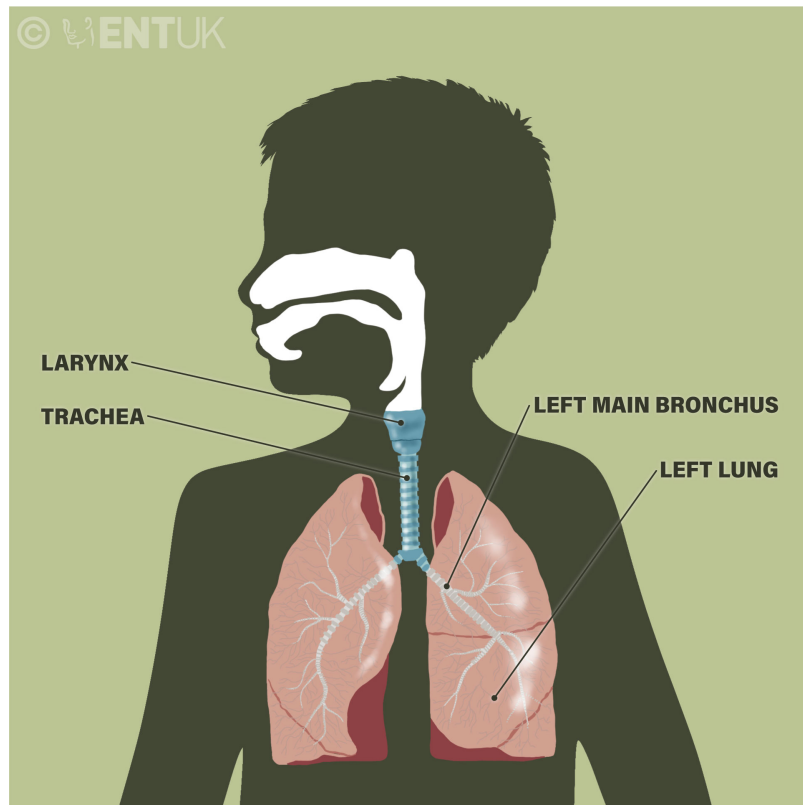


Figure 1: The main parts of the normal airway.

ABOUT THE PROCEDURE

Why does my child need an MLTB?

Your child may need an MLTB because of a problem with their airway and breathing, which may include:

- noisy breathing
- having croup many times in a row

- coughing and choking when eating or drinking

An MLTB will help your child's doctor understand the cause of the problem to help them treat it.

Sometimes surgery can be performed during the MLTB to treat any problems found. This will be discussed with you before the procedure. It will not be done without your agreement. Severe problems in the airway might be treated under the same general anaesthetic by an extra operation.

What are the alternatives?

A CT scan or other test may be organised and may provide information about your child's condition. An MLTB is usually recommended as it provides more information than other tests can.

However, not all children can have an MLTB. The MLTB may be hard to do if your child has a small jaw. Your doctor will discuss this with you.

Deciding whether to have the treatment

The decision to have surgery is based on your doctor's recommendation, your and your child's wishes, taking into consideration your child's circumstances. You may wish to change your mind about the operation at any time and signing a consent form does not mean your child must have the operation.

If you would like to have a second opinion regarding the treatment, your child's specialist or GP can arrange this for you

What happens before my child's operation?

You may be asked questions by the preassessment team to see if your child needs any tests before their operation.

You will be told when your child can eat and drink before the operation. You must follow this so that the procedure can be done safely.

What happens during my child's operation?

Your child will be given a general anaesthetic. This will put them to sleep for the operation.

Your child's vocal cords will be numbed with a local anaesthetic spray once they are asleep. A rigid endoscope is used to carry out an in-depth examination of the throat, voice box, windpipe, and bronchi.

Endoscopic view of a normal voice box during an MLTB

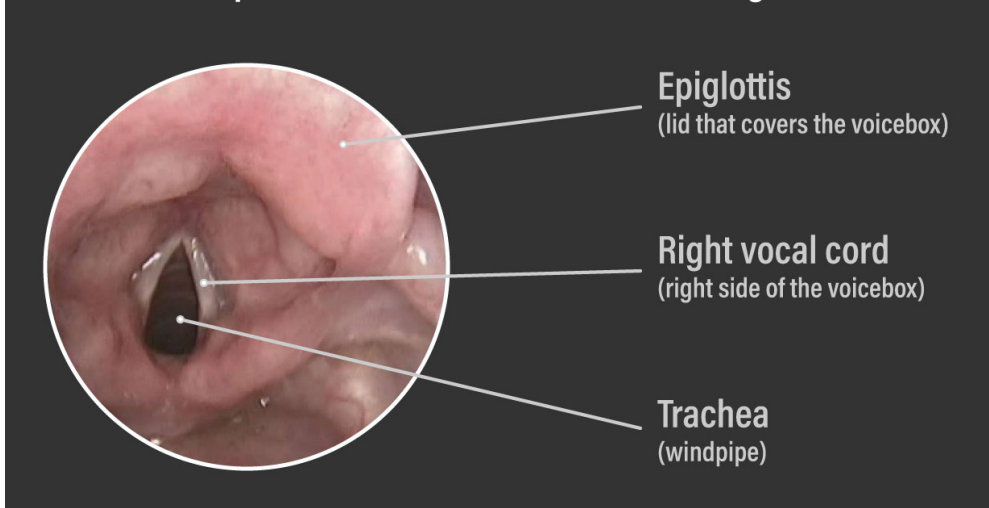


Figure 2(a) Endoscopic view of a normal voice box during an MLTB.



Figure 2 (b) Endoscopic view of a floppy voice box on breathing out

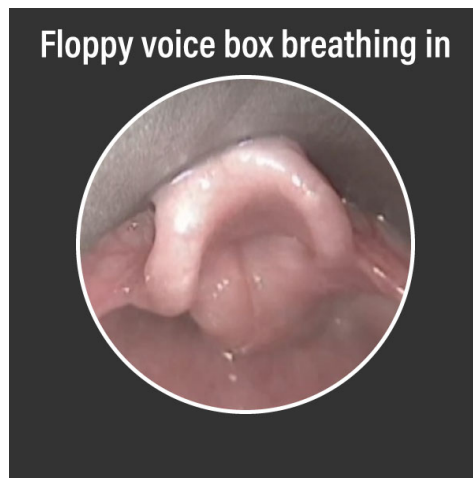


Figure 2c. Endoscopic view of a floppy voice box on breathing in

If something small is found during the procedure, such as a small cyst or inflammation tissue, the surgeon may remove it or a small part may be sent to a lab to get a diagnosis (a biopsy).

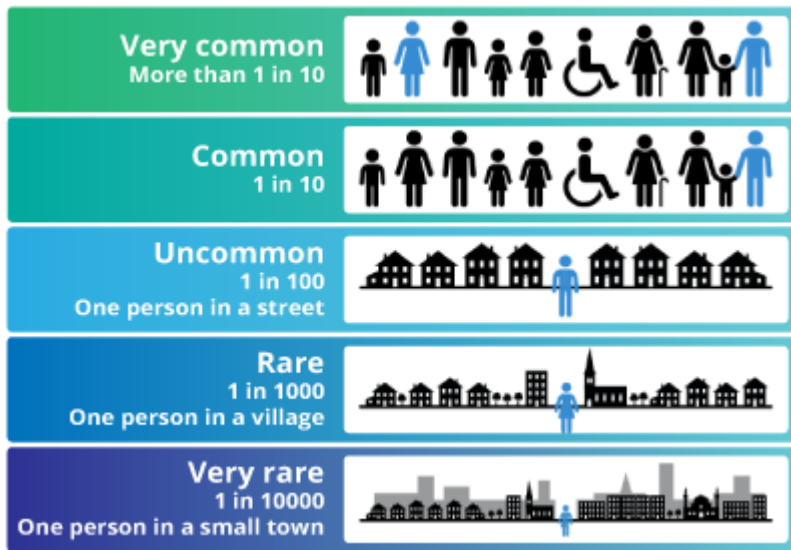
The surgeon may perform an **aryepiglottoplasty** or **supraglottoplasty** to divide a tight band* around the voicebox. These operations aim to open up the airway around the voice box if this is needed.

The whole procedure can take between half an hour and a few hours.

ABOUT THE RISKS

Are there any complications to this operation?

All surgery involves some risks. Complications fall into the following groups.



- **Sore throat.** Some children may have a sore throat after the procedure. Painkillers can be given. If the sore throat does not go away or your child develops a high temperature (38°C or above) after leaving the hospital, please call the hospital department or your GP.
- **Damage to teeth, lips and gums.** We use an instrument to look at your child's airway. This is a metal tube which sits on the teeth. There is a small risk of minor injury or bruising to your child's tongue, gums, lips or teeth. It is uncommon to damage, chip or dislodge a tooth. If your child has any loose, capped or crowned teeth, please let the surgeon and anaesthetist know before the operation.
- **Swelling of the airway.** There is a very small risk that the endoscope could damage your child's airway and make their breathing worse. In rare cases, steroids are needed to bring down any swelling. There is a small chance that your child may need to remain intubated for a short period of time after the surgery. This means they will be kept asleep with a tube to help them breath until the swelling settles down.

These risks will increase if an extra operation is performed during the diagnostic MLTB.

If your child has trouble breathing when they leave hospital, take them to the nearest Emergency Department straight away.

General anaesthetic. The operation takes place under general anaesthetic. This is very safe for children. Your child's pre-assessment team will inform you about the risks of a general anaesthetic. For more information, [click here](#).

AFTER THE PROCEDURE

What happens after my child's operation?

After the operation, your child will go to the recovery area. When the anaesthetic has worn off, they will go back to the day surgery unit if the surgery was performed as a day case. If they are staying overnight, they will be taken to the ward.

How long will my child be in hospital?

Your doctor will tell you if your child can go home on the same day or if they should stay overnight.

Can my child eat?

Your child must not eat or drink for at least an hour after the surgery because of the local anaesthetic spray to the throat and voicebox. The medical team will let you know when then can eat and drink.

How long will my child be off school?

You must keep your child off school or nursery for at least 24 hours. This is because of the effects of the general anaesthetic.

If your child had more extensive surgery than a simple examination, they may need to be off for longer. Your doctor will tell you more about this.

Will my child need further treatment?

Your child may need further tests or treatment after the MLTB. Your surgical team will tell you about this.

Will my child need to be seen in the clinic after the operation?

Your surgical team will tell you before you go home if you need an appointment.



Disclaimer: *This publication is designed for the information of patients. Whilst every effort has been made to ensure accuracy, the information contained may not be comprehensive and patients should not act upon it without seeking professional advice.*

Trusted
Information
Creator



ENT UK has recently gained PIF TICK accreditation to become a 'trusted information creator'.

Patient Information Forum

Kindly submit your feedback to help us improve our Patient Information Leaflets.

We greatly value your input and appreciate the time you take to provide it.

FEEDBACK SURVEY



Date Published: 18/10/2023 **Review Date:** 18/10/2026