TREATMENT &MANGMENT

The treatment of stridor must be tailored according to the particular underlying or predisposing condition present (see Etiology). Emergency management consists of ensuring that the airway is adequate. If it is not, appropriate resuscitative measures must be initiated. For some conditions (eg, epiglottitis and bacterial tracheitis), antibiotic therapy may be required, whereas in other scenarios, steroid therapy may be useful.

Surgical Care

For certain conditions, such as the following, surgical correction is required:

* Severe laryngomalacia
* Laryngeal stenosis
* Critical tracheal stenosis
* Laryngeal and tracheal tumors and lesions (eg, laryngeal papillomas and hemangiomas)
* Foreign body aspiration

Occasionally, tracheotomy is used to protect the airway to bypass laryngeal abnormalities and stent or bypass tracheal abnormalities. Other conditions, such as[retropharyngeal](http://emedicine.medscape.com/article/995851-overview) and [peritonsillar abscess](http://emedicine.medscape.com/article/970260-overview), may have to be dealt with on an emergency basis.

Diet

Patients with moderate to severe stridor should be given nothing by mouth in preparation for possible intubation, laryngoscopy, bronchoscopy, and tracheotomy.

Long-Term Monitoring

Close clinical follow-up is important, especially in patients with congenital anomalies (eg, laryngomalacia, laryngeal webs, and vocal cord paresis), to follow disease progression.