# Strider:-

#### Definition:-

- It is an auditory manifestation of disordered respiratory function due to air flow changes within the larynx, trachea, or bronchi.
- so it needs investigations in every case.

Other sounds that resemble strider:-

- Not all sounds arising from the respiratory tract are striderous e.g.:
- 1-stertor: moist sounds like rattling or bubbling of secretions in the pharynx or larynx.
- 2-rales or cripitation: sounds arising from the distal part of the bronchial tree or alveoli.

#### Mechanism:-

- Strider is due to turbulence of air flow within a partially obstructed respiratory tract.
- It can be described in terms of it's relationship to the phase of respiratory cycle.

# the following points should be noted:-

- 1-inspiratory strider: occur in supraglottic lesions.
- 2-expiratory strider: small bronchial and bronchiolar obstruction e.g. expiratory wheeze of bronchial asthma and retained bronchial foreign body.
- 3-biphasic strider: in cases of glottic and tracheal lesion.

# Associated signs and symptoms:

- 1-cough.
- 2-horseness.

- 3-deglutition and respiratory signs and symptoms.
- 4-dyspnea: strider and dyspnea are both manifestations of air way obstruction, severity of one reflect the severity of the other.
  - General features: strider is always a symptom or sign never a diagnosis nor a disease.

### History:

 character, severity, age of onset.

- relation to feeding, crying, and exercise.
- Related disease.

## Physical examination:

- appearance, temperature, pulse rate, respiratory rate.
- irritability, cyanosis.
- Recession: subcostal, suprasternal, supraclavicular, and intercostal.

### Investigations:

laboratory, and radiology.

### Causes of strider:-

a-congenital:

- 1-laryngeal web.
- 2-subglottic stenosis.
- 3-laryngomalacia.
- 4-laryngotracheal cleft.
- 5-vascular anomaly.
- 6-haemangioma.
- b-acquired:-
- 1-apyrexial: foreign body, injury, scald, papilloma, malignant tumor.
- 2-pyrexial: acute epiglottitis, acute laryngitis, acute laryngo-tracheo-bronchitis, diphtheria.
- c- others: any cause of upper respiratory obstruction.

# Criteria of severity of strider:-

- 1-recession of suprasternal, supraclavicular, intercostal and subcostal space.
- 2-anxiety, palor, sweating.
- 3-cyanosis: indicate late and grave stage.

#### Treatment:-

- 1-relieve upper respiratory obstruction.
- 2- treat the specific cause.
  Intubations of the larynx:-

- 1- methods from above the vocal cords:-
- A-naso-tracheal or orotracheal intubation.
- B-fiberoptic technique.
- C-rigid bronchoscope.
- D-laryngeal mask airway.
- 2- methods from below the cords:
- A-tracheostomy.
- **B-retrograde intubation.**
- C-crico-thyrodotomy.
- D-transtracheal needle ventilation.

- E- minitracheostomy :by vertical stab incision through the cricothyroid membrane followed by insertion of canula to provide delivery of oxygen.
- F- percutaneous tracheostomy : trachea is punctured by needle and canula . then a guide wire is introduced into the trachea and followed by passage of tracheostomy tube.