**ABSTRACT**

Adductor spasmodic dysphonia (ADSD) requires re-injection. The dosing effects after prolonged injections are not well reported. We report our ten-year experience in the utilization of BTX in ADSD.

**METHODS:**

From a database of 182 ADSD patients from 1997-2008 treated with BTX, we pulled a subset of 87 patients receiving BTX for greater than 3 visits (average 10.27 visits, range 3-40). We analyzed duration of effect, dosing effects and changes in administration technique.

**RESULTS:**

This study group was predominantly female (3:1), presenting at mean age 60. All BTX was administered with laryngeal electromyographic guidance. The average starting dose was 2.28 units (range 1.25 – 3.75). The average dose per injection was 2.15 units (range 0.25-12.5) with an average time interval of 5.6 months between visits.

Patients reached a stable dosing regimen at an average of 1.34 months, with 75% optimized after the first visit. There was a trend towards increased average dosage over time when patients underwent over 15 treatment visits (p=0.14), with increased variation in effect (SD 0.95 vs 1.36). Average time interval between visits tended to decrease over time.

The average cumulative dose was 44.23 units, with one patient receiving a maximum of 262.5 units; no significant adverse effects occurred in our entire experience.

**CONCLUSIONS:**

Botulinum therapy in ADSD is stable and safe. Prolonged treatment over 15 visits may require changes in dosing and technique. Unilateral injections provide an effective alternative to bilateral injection.

**REFERENCES**