

A disordered voice can be defined as one that has one or more of the following characteristics: it is not audible, it is not appropriate for the gender and age of the speaker; it is not capable of fulfilling its linguistic and paralinguistic functions; it fatigues easily; it is associated with discomfort and pain on phonation. Voice disorders can be divided into organic, neurologic, and functional categories. To evaluate the distribution and causes of voice disorders, this is a cross-sectional, descriptive study, consisted of 100 patients. They were 46 males and 54 females. They had been assessed at the otolaryngology department in Al-Diwania teaching hospital, Al-Diwania city, Iraq, during the period between May 2013 to September 2015, the age range from 10-80 years. Inclusion criteria was voice disorder for 3 weeks or more. Patients were first examined by an otolaryngology specialist, this is followed by the clinical examination of the throat. Indirect laryngoscopy was done, followed by fiberoptic laryngeal video endoscopy. Imaging study was done for patients with tumoral lesions. For patients with suspected neurological problems magnetic resonance imaging of the brain and neurological consultation was done. The diagnosis then confirmed and the patients receive treatment accordingly. Most of patients with voice disorders are less than 50 years old. The prevalence of voice disorders was higher in women than in men. The commonest causes of dysphonia are organic (70%) followed by functional (24%) and neurologic dysphonia (6%). In patients with organic dysphonia the commonest cause was the Chronic nonspecific laryngitis (20%), followed by vocal cord nodules (18%), vocal cord polyp (13%) while the granuloma was the least (1%). Dysphonia is an important symptom of laryngeal disorders. The highest prevalence of voice disorders was observed during the years of active life, and the majority are due to benign organic diseases.