



# Globus sensation

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Information for patients from the Speech and Language Therapists and ENT doctors

You have been diagnosed with globus sensation. This leaflet explains:

- what globus sensation is
- how it is diagnosed
- what the symptoms are, and
- how it can be managed.

## What is globus sensation?

Globus sensation is a feeling that you have a lump in your throat, but your swallowing is normal. Some people describe it as a frog in their throat, others as if their throat is tightly constricted.

Globus occurs when certain muscles in your throat become very tight. This is mainly the cricopharyngeus and constrictor muscles. It is not serious, and is a surprisingly common problem. It may be intermittent (comes and goes) or persistent (you feel it most of the time). The symptoms and severity can vary from day to day.

## How is globus sensation diagnosed?

This condition is often diagnosed following an examination of a patient's throat by an ear, nose and throat (ENT) doctor. A Speech and Language Therapist (SLT) may also help with the diagnosis.

## What are the symptoms?

Different people describe it differently. You may feel:

- A tightness or a pressure in your throat.
- Catarrh / mucus in your throat that you are unable to clear.
- An area of discomfort in your throat (rather than pain).

- A feeling of something stuck or a lump in your throat.
- Intermittent hoarseness.

Typically, the sensation improves when you eat and drink.

### What can trigger globus sensation?

- **Reflux**

Laryngopharyngeal reflux, sometimes called 'silent reflux', is a condition where stomach contents travel up the food pipe and into the throat. It can be difficult to diagnose, as individuals often do not get the symptoms of heartburn or indigestion. It is commonly linked with chronic (long-term) throat clearing, voice change, and globus sensation.

Certain foods and drinks can also contribute to reflux. These include spicy foods, fried and fatty foods, acidic food, alcohol, and caffeine.

- **Cervical spine problems**

Certain changes in the spine, such as osteophytes or cervical spondylosis, can contribute to globus symptoms.

- **Stress**

Globus may occur during or following certain events, such as bereavement or a build-up of normal life stresses.

- **Smoking, tiredness, and voice strain** may contribute to globus.

### How can I manage my symptoms?

The following simple steps often relieve symptoms, and commonly the problem disappears. If your symptoms have been present for a very long time, it can take some months for these remedies to work.

- **Managing reflux**

If you have symptoms of **reflux, indigestion, or heartburn**, talk to your GP or pharmacist about medication.

- **Avoid clearing your throat**

Often people get into a habit of clearing their throat to try to clear the discomfort. This only gives temporary relief. Instead it actually aggravates the throat and will not help the globus.

You can stop the habit of clearing your throat in three or four days. To do this:

- Simply think just **before** you are about to clear your throat, then swallow or drink a sip of water instead.
- If you still have a strong desire to clear your throat, try to yawn or 'sniff' then blow out through pursed lips.

- **Release any jaw, neck, and shoulder tension**

Regular gentle neck and shoulder exercises help to reduce tension in throat muscles. This will ease the globus sensation.

Try the following exercises several times a day, unless you have a medical condition that affects your neck, shoulders, or spine. If you do, please speak to your doctor or physiotherapist before starting these exercises.

- First, correct your posture and think tall. Imagine a string running up your spine and out the top of your head, pulling you up to the ceiling. Your shoulders and arms should hang comfortably. Hold for 10 seconds. Your head should sit easily on top of your spine, and should not be poking forward or pulled back. Sometimes slightly flexing your head relieves globus.
- Shrug your shoulders up to your ears. Release and notice that your arms are hanging and your neck is long. Repeat.
- Roll your shoulders in a circle several times, then drop.
- Tip your head gently to the right, so that your ear moves closer to your right shoulder. Then tip it towards your left shoulder. Hold each position for about 10 seconds.
- Let your head drop gently onto your chest. Keep your mouth slightly open. Feel the stretch at the back of your neck. Hold this position for 10 seconds, before raising your head back up.

- **Relax your throat muscles**

- When your throat feels uncomfortable, take a sip of water and swallow.
- Yawn with a good open mouth. This is a really helpful exercise, so try to do this **often**.
- Exaggerate chewing movements. Open your mouth (for example, wide enough to fit one or two fingers wide between your front teeth). Move your jaw and tongue loosely up and down in a **slow** and **easy** exaggerated, **forward** chewing motion.

- **Learn to relax**

If you think you may be doing too much or you are feeling a little stressed, try to look after yourself and enjoy some relaxation. Choose a way of relaxing that suits you. This could be:

- exercise, such as walking, swimming or yoga
- listening to music
- meditating, or
- quiet tummy breathing.

To practice tummy breathing, place a hand on your tummy, relax your shoulders, and breathe quietly. As you breathe air in, you will notice your tummy move out. As you breathe air out, you will notice your tummy get smaller. This will happen naturally.

If you are feeling tearful, do not stop yourself crying. Trying to stop yourself can cause a feeling of a 'lump' in your throat. Allowing yourself to cry should help to ease this feeling.

- **Drink enough**

Some people find that their throat is very dry. If this is the case for you, you need to drink more water.

### What if I have any further questions or concerns?

If you follow this advice you should find that the globus sensation improves or disappears.

If you continue to be troubled by it, please ask the Speech and Language Therapist or ENT doctor you are seeing for advice. Or, ask your GP to refer you to either of these services.

**This leaflet has been produced with and for patients.**

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