

## **ABSTRACT**

**INTRODUCTION:** Despite Sri Lanka having high prevalence of tuberculosis, laryngeal tuberculosis (TB) is rarely seen in today's practice. But in the presence of immunosuppression it should always be included in the differential diagnosis in a patient presenting with characteristic clinical features. Laryngeal tuberculosis could be a primary disease or secondary disease following tuberculosis in another site.

**CASE:** We report a case of a 44-year-old woman who was on multiple immunosuppressive drugs presenting with a fever, dysphonia, and odynophagia. She was diagnosed to be having laryngeal tuberculosis.

**CONCLUSION:** Although laryngeal tuberculosis is rare, a high level of suspicion should be maintained to diagnose it in a patient with risk factors presenting with characteristic clinical features and having suggestive direct laryngoscopic features. It is a disease that needs urgent treatment after timely diagnosis.