2013

Intranasal tooth and associated rhinolith in a patient with cleft lip and palate

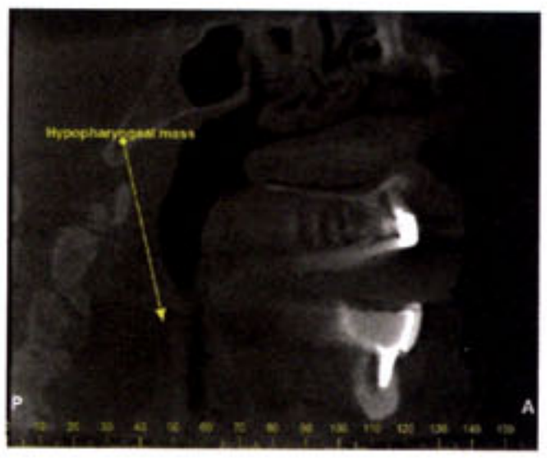
Ear, nose, and throat journal:New York, v. 92, n. 3, p.94-95, Mar. 2013
http://www.producao.usp.br/handle/BDPI/33858

Ear, Nose & Throat Journal's Web site is easy to navigate and provides readers with more editorial content each month than ever before. Access to everything on the site is free of charge to physicians and allied ENT professionals. To take advantage of all our site has to offer, go to www.entjournal.com and click on the "Registration" link. Once you have filled out the brief registration form, you will have full access. Explore and enjoy!

ONLINE EXCLUSIVES

Hypopharyngeal lipoma causing obstructive sleep apnea: Discovery on dental cone-beam CT

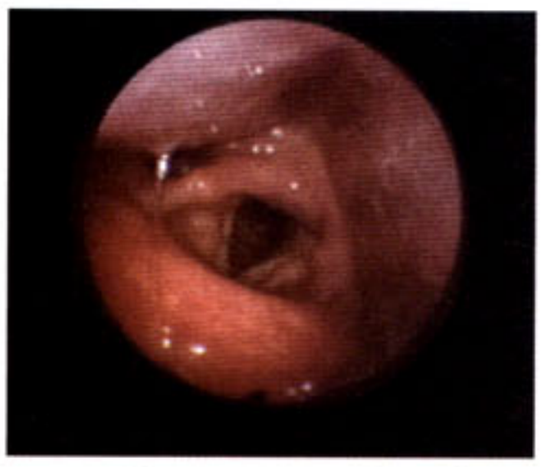
Ashok Balasundaram, BDS, DDS, MDS, MS, Diplomate ABOMR



Cone-beam computed tomography (CBCT) is primarily used for a variety of dental purposes, but it may also yield nondental findings that can have significant implications for patient health. For example, physicians should be aware that CBCT can identify some of the etiopathogenic causes of obstructive sleep apnea, as occurred in the case described in this report. The patient was a 76-year-old man who presented to a dentist for implant therapy. A CBCT that had been performed in preparation for dental implant placement revealed the presence of a large hypopharyngeal lesion that was obstructing the airway. An otolaryngologist excised the lesion, which on biopsy proved to be a lipoma. Following removal of the lesion, the patient's episodic sleep apnea and snoring resolved. Medical physicians should be aware of maxillofacial CBCT technology and its ability to identify lesions that could cause potential life-threatening situations.

Case report: Metastatic breast cancer presenting as a hypopharyngeal mass

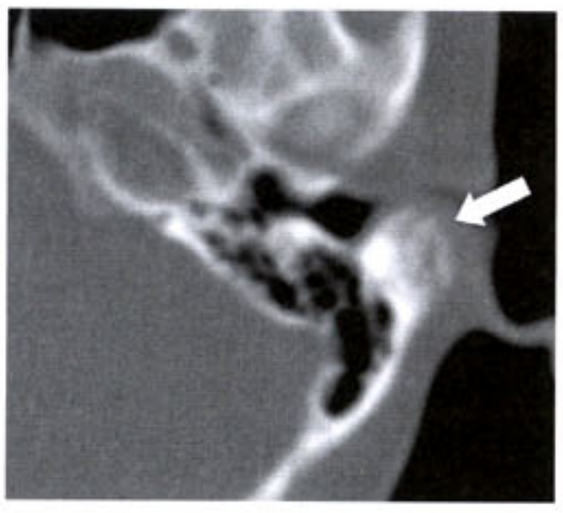
Rodrigo Bayon, MD; Sandra K. Banas, MD; Barry L. Wenig, MD, MPH



Although carcinoma of the breast has a propensity toward distant metastasis, metastasis to the head and neck is uncommon. Most patients with metastasis to the head and neck region present with cervical lymphadenopathy; however, spread to the upper aerodigestive tract has been described previously. We present a case of a patient found to have a pedunculated mass in her right piriform sinus. When she swallowed, the mass would completely prolapse into the esophagus and cause symptoms. Subsequent workup revealed widespread metastatic disease, for which the patient was treated with chemoradiotherapy. Microlaryngoscopy with excision of the mass was performed for palliation of her dysphagia, and a diagnosis of metastatic breast carcinoma was obtained. The patient healed well from the excision and went on to be treated for the metastatic breast cancer. To our knowledge, our report represents the first case of metastatic breast carcinoma presenting as severe dysphagia.

Mastoid osteoma: A case report and review of the literature

Jeffrey Cheng, MD; Roberto Garcia, MD; Eric Smouha, MD



We describe the case of a 22-year-old woman who presented with a slowly growing osseous lesion of the mastoid cortex. On computed tomography, the lesion was found to involve the mastoid cortex, with which it demonstrated similar attenuation. The indications for treatment in this case were the patient's sensation of a mass effect, the encroachment of the mass onto the external auditory meatus, and a cosmetic deformity. The tumor was removed in its entirety via a postauricular approach. Findings on histopathologic examination were consistent with a compact osteoma. Mastoid osteomas are rare, benign tumors. If their growth significantly occludes the meatus, they may cause cosmetic deformities, conductive hearing loss, and recurrent external ear infections. Several other osseous lesions of the temporal bone should be considered in the differential diagnosis. The etiology of mastoid osteomas is poorly understood. Surgical management can be undertaken with minimal postoperative morbidity.

Intranasal tooth and associated rhinolith in a patient with cleft lip and palate

Gisele da Silva Dalben, DDS, MSc; Vivian Patricia S. Vargas, DDS; Bruno A. Barbosa, MSc; Marcia R. Gomide, PhD; Alberto Consolaro, PhD

We report the case of a 9-year-old girl who presented with a complaint of a malodorous bloody discharge from the left naris. The patient had previously undergone a complete repair of left-sided cleft lip and palate. Clinical examination revealed hyperplasia of the nasal mucosa on the left side. X-ray examination of the nasal cavity demonstrated a radiopaque structure that resembled a tooth and a radiopaque mass

similar to an odontoma that was adherent to the root of the suspected tooth. With the patient under general anesthesia, the structure was removed. On gross inspection, the structure was identified as a tooth with a rhinolith attached to the surface of its root. Microscopic examination revealed normal dentin and pulp tissue. A nonspecific inflammatory infiltrate was observed around the rhinolith, and areas of regular and irregular mineralization were seen. Some mineralized areas exhibited melanin-like brownish pigmentation. Areas of mucus with deposits of mineral salts were also observed. Rare cases of an intranasal tooth associated with a rhinolith have been described in the literature. We believe that this case represents only the second published report of an intranasal tooth associated with a rhinolith in a patient with cleft lip and palate.

Internal carotid artery in zone IIb and its implications: A case report

Drew P. Plonk, MD; J. Dale Browne, MD, FACS

The potential for aberrant anatomy in the neck should be respected in order to avoid unexpected and potentially devastating injury during surgical and other procedures. Anatomic variations involving the internal carotid artery are believed to exist in as much as 6% of the population. We describe a case of a tortuous internal carotid artery that was found in zone IIb during a neck dissection in a 60-year-old man, and we discuss the implications of this anomaly..

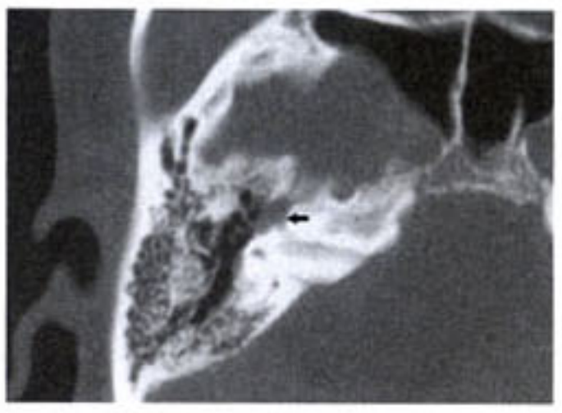
Oncocytoma of the nasal cavity: A case report

Mark E. Fons, DO; David Poetker, MD; Paul E. Wakely Jr., MD

Oncocytomas arising in the nasal cavity are quite rare. These entities more commonly occur in the major salivary glands, minor salivary glands, respiratory seromucinous glands, and endocrine organs. Very few cases of oncocytoma in the nasal cavity have been reported, with only 5 diagnosed as malignant. This article describes a case involving an 81-year-old man with a nasal oncocytoma that was completely resected with an endoscopic medial maxillectomy. The diagnostic rationale is discussed, along with a review of the literature.

Cerebrospinal fluid leak of the fallopian canal

Karen B. Teufert, MD; William H. Slattery, MD



Spontaneous cerebrospinal fluid (CSF) leaks from the fallopian canal are extremely rare, as only a few cases have been reported in the world literature. We describe a case of spontaneous CSF otorrhea through an enlarged geniculate fallopian canal. The patient was a 45-year-old woman who presented with a history of CSF rhinorrhea and otorrhea from the right ear. Myringotomy and tube insertion revealed CSF otorrhea. Contrast-enhanced computed tomography revealed that the geniculate fossa was smoothly enlarged (demonstrating remodeling of bone). A middle fossa craniotomy with temporal bone exploration was performed. Intraoperative inspection detected the presence of a fistula secondary to a lateral extension of the subarachnoid space through the labyrinthine segments of the fallopian canal. We discuss the management of this unusual finding, which involves sealing the fistula while preserving facial nerve function.

Anterior jugular phlebectasia and tinnitus: A case report

Roshan Kumar Verma, MS, DNB, MNAMS; Rahul Modi, MS; Naresh K. Panda, MS,DNB, FRCS

Abnormal dilation of a normal anterior jugular vein is a rare anomaly and usually presents as a neck lump. To the best of our knowledge, this is the first report in the literature of such a case in which the patient presented with severe tinnitus. Excision of the dilated portion of the anterior jugular vein in our patient alleviated the severe tinnitus

ONLINE DEPARTMENTS

Laryngoscopic Clinic:

Bilateral Gore-Tex implant extrusion following type I thyroplasty

Farhad R. Chowdhury, DO; Adam L. Baker, MD; Robert T. Sataloff, MD, DMA, FACS

Rhinoscopic Clinic:

Metastatic hepatocellular carcinoma in the nasal vestibule

Jinsu Choi, MD; Bosung Kim, MD