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Acute cervical pain and dysphagia in a 43-year-old man

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Case report

A 43-year-old patient without noteworthy antecedents consulted his attending physician for dysphagia and diffuse cervical pain that has been evolving for three days. The patient was sub-febrile ($38\,^{\circ}$ C). The clinical examination detected stiffness of the neck without neurological disorder. The ORL examination did not detect any significant anomaly, in particular in the tonsil region. The lab tests revealed mild hyperleukocytosis ($12,000\,\text{GB/L}$) with neutrophils ($11,000\,\text{G/L}$) and an ascension or C-reactive protein ($60\,\text{mg/L}$). A cervical scan with the injection of iodine-based contrast products was carried out (Figs. 1 and 2).

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 $\begin{tabular}{ll} \textbf{Figure 1.} & \textbf{Axial CT section after injection of iodinated contract} \\ \textbf{product.} & \end{tabular}$

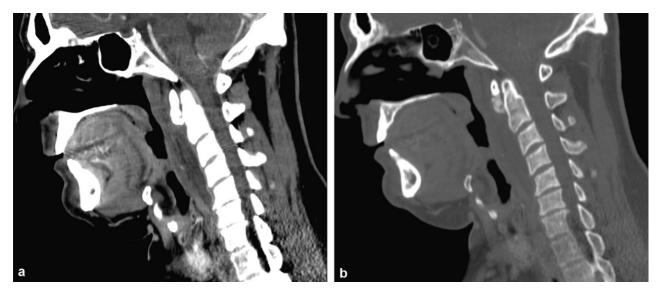


Figure 2. Sagittal CT sections of the cervical vertebra in soft part window (a) and in bone window (b).

What is your diagnosis?

After reading the case report, what diagnosis would you choose from the following proposals:

- retropharyngeal abscess;
- cervical spondyldiskitis;
- calcific retropharyngeal tendinitis;
- retropharyngeal cellulitis;
- acute inflammatory rheumatoid arthritis.

Disclosure of interest

The authors declare that they have no conflicts of interest concerning this article.

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