Cervical osteophytes: a cause of potentially life-threatening laryngeal spasms

Case report

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✓ This 80-year-old woman presented with acute breathing difficulty during neck flexion when cyanosis also developed. The only potential causes were detected on cervical magnetic resonance imaging: two large anterior cervical osteophytes compressing the retropharyngeal space. Excision of these osteophytes resulted in resolution of the symptoms.

KEY WORDS • cervical osteophyte • laryngeal spasm • cyanosis

Abbreviation used in this paper: MR = magnetic resonance.
Compression of the esophagus against an osseous protuberance in the cervical region was reported first in 1905 and cervical spondylitic dysphagia was described by Mosher in 1926. There was mention of stridor and sleep apnea in the literature, but it did not cause the acute laryngeal problem observed in our case.

In our patient MR imaging of the neck clearly documented osteophytes compressing the posterior wall of the lower pharynx and larynx. In the absence of other organic causes, we were certain that the patient’s symptoms were related to the large C-4 and C-5 osteophytes. Whether the osteophytes produced these symptoms by direct compression/kinking of the airway or through irritation/stimulation of the laryngeal neuromuscular system is difficult to determine, particularly because of the absence of dysphagia; however, the complete resolution of symptoms postoperatively proves that the osteophytes caused the laryngeal spasms.

References


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