Case Authors Centre (189) Complicated otitis not just a question of children.

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## CASE PRESENTATION

A 51-year-old man with a history of chronic recurrent otitis media, who has earache intensifying despite antibiotic treatment. On examination, tumefaction was observed in the right retroauricular area with inflammation and redness with protrusion of the ear.

Given these findings, the clinical suspicion is complicated mastoiditis, which is why we decided to request a facial and skull CT.In the CT, besides the complete occupation of the external auditory canal, middle ear and mastoid cells, a disruption of the cortex of the same with adjacent retroauricular collection is observed.

An irregularity of the internal cortex was observed without apparent intracranial involvement although the study was performed without contrast. Radiological findings were compatible with coalescent mastoiditis with retroauricular abscess (Bezold).

## **DISCUSSION**

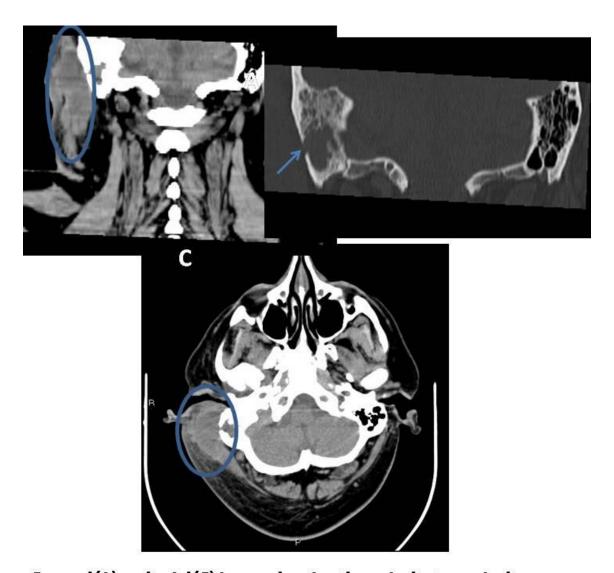
The key element in the inflammatory pathology of the ear is the Stachium tube; depending on the degree of involvement of the same will change the intensity, duration or reversibility. AOM in childhood is very frequent and with a tendency to recurrence, due to tubal, immunological immaturity and / or hypertrophy of adenoids.

When there is a continuous tubal obstruction acute otitis media can occur. Normally diagnosed and treated early, the infection does not cause extra-auricular complications. Between the complications of AOM, the most frequent is acute mastoiditis which could origin other intra- or extra-temporal complications. Although these complications are common between 6 months and 3 years, it is possible but exceptional to find it in adults (as in our case). If they are not treated in time the mastoiditis externalize or progress towards the inside of the skull; therefore, in the presence of clinical suspicion, a CT scan with intravenous contrast is indicated to rule out the presence of other complications and to evaluate the need or not for urgent surgical treatment.

Among the extracranial complications of a mastoiditis are: coalescing mastoiditis, superiose abscess, Bezold's abscess (our case), perisone abscess and labyrinthitis. In the intracranial we found the epiudural abscess, dural venous thrombophlebitis and dural empyema.

## CONCLUSION

Although acute otitis media and its complications are prevalent in pediatric age, we can sometimes find them in adults so we should be familiar with their radiological findings if we work with children or not.



Coronal (A) and axial (C) image showing the apical retroauricular collection or Bezold's abscess (blue circle). Image B coronal section in bone window: occupation of the right ethmoidal cells and disruption of the cortex (arrow).

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