A Curious Case of Dysphagia Due to Osteophytes

Um Curioso Caso de Disfagia Causada por Osteófitos

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Acta Med Port 2021 34(AOP) • https://doi.org/10.20344/amp.14786

Keywords: Cervical Vertebrae; Deglutition Disorders; Osteophyte
Palavras-chave: Osteófito; Perturbações da Deglutição; Vértebras Cervicais

An 80-year-old male with Parkinson’s disease and partially dependent on activities of daily living (Barthel index 45) was admitted due to a first episode of community-acquired pneumonia. He also complained of long-lasting difficulty in swallowing, which his attending physician attributed to neurogenic dysphagia. Upon closer evaluation, the patient mentioned non-acute onset dysphagia, initially for liquids but now mainly affecting solid foods. The difficulty in swallowing solids was progressive, intermittent, and well-localized to his lower neck. The chest-radiograph revealed a tracheal stricture (Fig. 1), prompting a neck computed tomography that showed an exuberant anterior osteophyte in the C4-C5 vertebrae with soft-tissue and tracheal compression (Fig. 2). Although spinal osteophytes are common, occurring in one in every five elderly patients, less than 1% of osteophytes lead to dysphagia.1–5 This case illustrates how a thorough investigation is essential to evaluate the cause of dysphagia. The patient is currently being managed through a conservative approach due to personal preference.

AUTHORS CONTRIBUTION


LC: Contribution to the design of the work. Data interpretation. Critical review. Responsible for the intellectual integrity of the paper.
PROTECTION OF HUMANS AND ANIMALS: The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013. DATA CONFIDENTIALITY: The authors declare having followed the protocols in use at their working center regarding patients’ data publication. INFORMED CONSENT: Obtained. CONFLICTS OF INTEREST: All authors report no conflict of interest. FUNDING SOURCES: The authors declare that there were no external sources of study for the performance of this article.

REFERENCES