

[ PICTURES IN CLINICAL MEDICINE ]

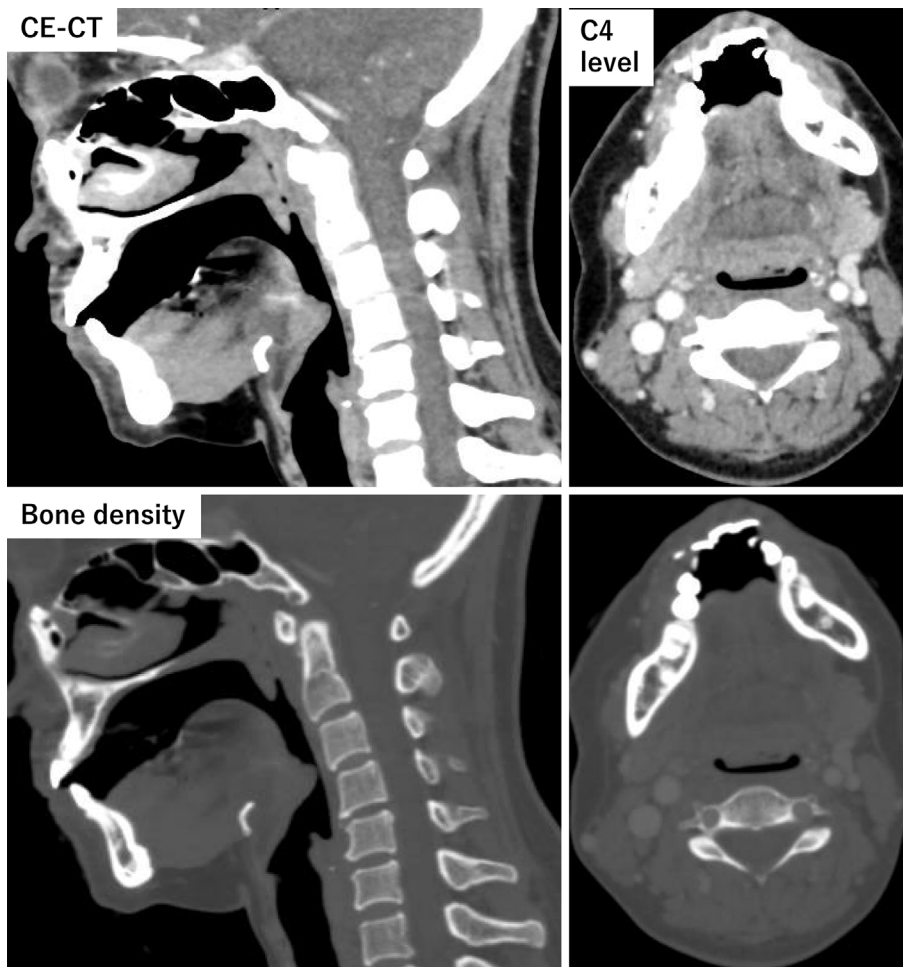
## Acute Non-calcific Retropharyngeal Tendinitis

Futoshi Nakagami<sup>1</sup>, Hideharu Hagiya<sup>1</sup> and Hiromi Rakugi<sup>2</sup>

**Key words:** tendinitis, non-calcific, retropharyngeal

(Intern Med 57: 3499-3500, 2018)

(DOI: 10.2169/internalmedicine.1127-18)



**Picture 1.**

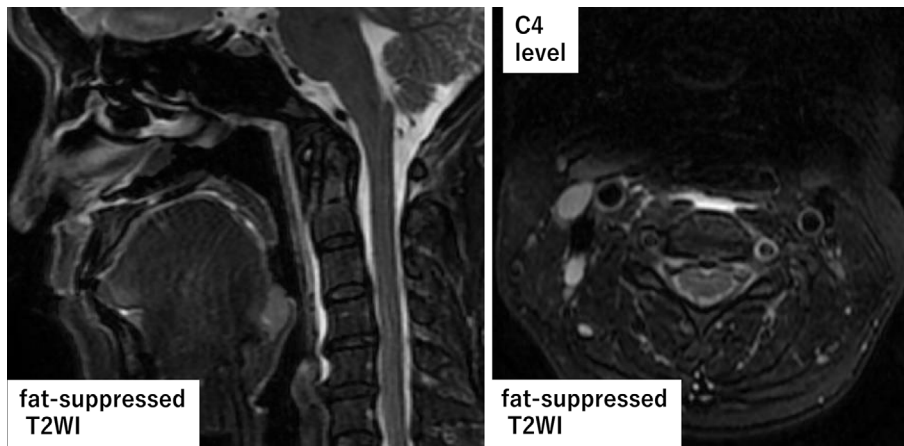
A 47-year-old woman with trismus, posterior auricular tenderness and right-ward torticollis due to severe neck pain without a fever presented to our hospital. Computed tomography (CT) revealed neither calcification nor swelling of the soft tissue (Picture 1). Retropharyngeal abscess was excluded, and a further examination by magnetic resonance

imaging (MRI) showed prevertebral effusion at the C2-5 level (Picture 2). Thus, a diagnosis of retropharyngeal tendinitis was made, and her symptoms promptly improved with loxoprofen after two days. Retropharyngeal tendinitis is also known as calcific tendinitis of the longus colli muscle and presents with various symptoms, including acute neck pain,

<sup>1</sup>Department of General Internal Medicine, Osaka University Medical Hospital, Japan and <sup>2</sup>Department of Geriatric Medicine, Osaka University Graduate School of Medicine, Japan

Received: March 6, 2018; Accepted: May 9, 2018; Advance Publication by J-STAGE: August 10, 2018

Correspondence to Dr. Futoshi Nakagami, fnakagami@hp-gm.med.osaka-u.ac.jp



**Picture 2.**

torticollis and trismus. The pathology is assumed to be induced by the deposition of calcium hydroxyapatite (1). CT is the gold standard for detecting this key finding and differentiating retropharyngeal tendinitis from other disease; however, some patients may lack calcification. In such cases, MRI can provide a clue to the diagnosis (2). The present case reminds us of the possibility of retropharyngeal tendinitis without calcification.

**The authors state that they have no Conflict of Interest (COI).**

### References

1. Park R, Halpert DE, Baer A, et al. Retropharyngeal calcific tendinitis: case report and review of the literature. *Seminars Arthritis Rheum* **39**: 504-509, 2010.
2. Paik NC, Lim CS, Jang HS. Tendinitis of longus colli: computed tomography, magnetic resonance imaging, and clinical spectra of 9 cases. *J Comput Assist Tomogr* **36**: 755-761, 2012.

The Internal Medicine is an Open Access journal distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (<https://creativecommons.org/licenses/by-nc-nd/4.0/>).