

Nasopharyngeal Carcinoma Presenting as Gradenigo's Syndrome

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Abstract:

Title: Nasopharyngeal Carcinoma Presenting as Gradenigo's Syndrome

Purpose: To report a case of nasopharyngeal carcinoma with extension to the cavernous sinus initially presenting as Gradenigo's syndrome.

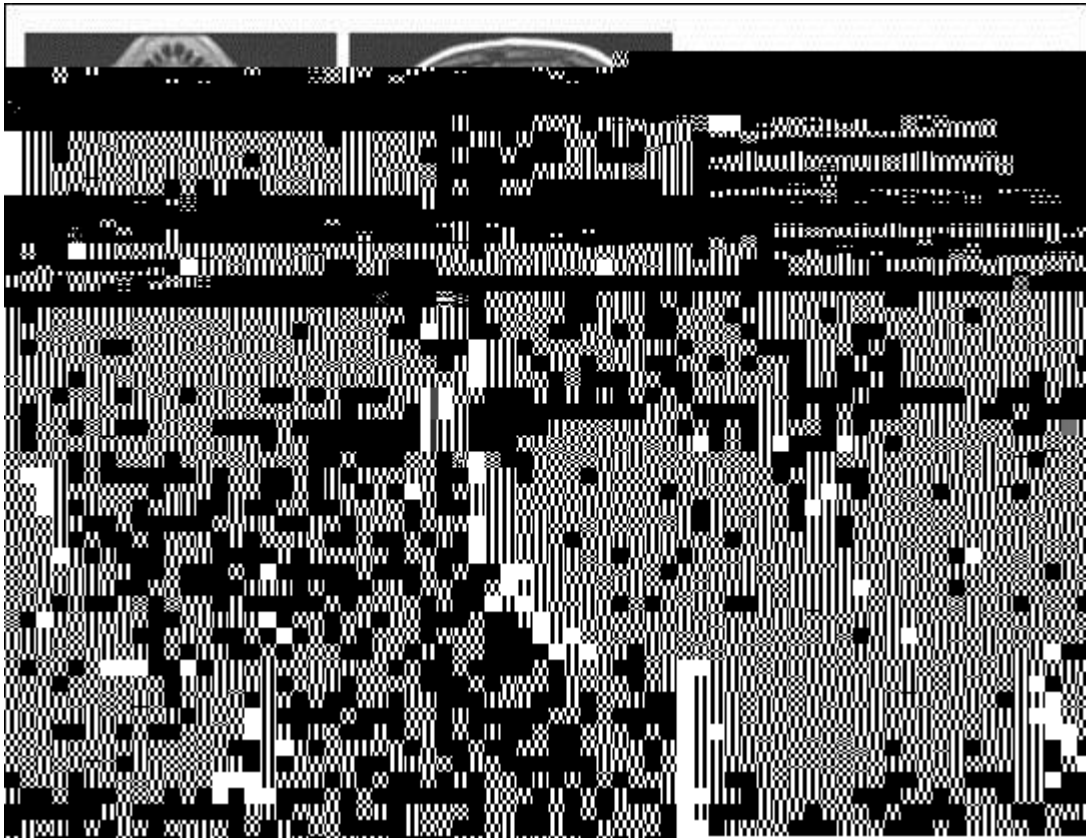
Design: Observational case report.

Methods: A report of a case from our institution is the basis of this study.

Results: A patient presented with presumed Gradenigo's syndrome with abducens palsy, otitis media, and facial pain. He subsequently developed Homer's syndrome and cranial nerve IV, V, VII, and VIII deficits and was diagnosed with nasopharyngeal carcinoma with extension to the cavernous sinus.

Conclusions: In patients presenting with presumed Gradenigo's syndrome with or without accompanying neurological findings, nasopharyngeal carcinoma should be considered and complete otolaryngological evaluation should be performed.

fluid. Evaluation for infection, including bacterial and fungal cultures, was negative. Over the next few days, trochlear nerve deficits resolved but the patient developed left facial nerve palsy despite completion of antibiotic therapy. Further audiological evaluation displayed mild ipsilateral neurological hearing loss. Stereotactically-assisted transphenoidal biopsy was performed which displayed a poorly differentiated nasopharyngeal carcinoma. The lesion was inoperable and chemotherapy with cisplatin and 5-fluorouracil in conjunction with radiation therapy was initiated.



Discussion:

Gra denigo's syndrome was first described in 1907 as a s a p i c a l p e t r o s i t i s

