

# **STYLOCAROTID SYNDROME – A RARITY**

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### Introduction

- Watt W. Eagle (1937)
- Styloid Process:
- Normal 2.5 to 3 cm; Elongated >3 cm.
  Pressure on neurovascular structures in its vicinity

Langlais classification









- Pharyngodynia
- Dysphagia Foreign body sensation
- Pain and giddiness on neck rotation Facial and boa
- Facial and head pain

## **Case Presentation**

A 36-year-old male patient reported with complaints of pain in either side of the neck. History of on & off neck pain radiating to the shoulders and associated with giddiness during head rotation. Difficulty in swallowing and foreign body sensation. On intraoral examination, tenderness in the bilateral tonsillar fossa was evident.

Orthopantomograph (OPG) showing elongated styloid process on either sides approximating the hyoid bone



Three dimensional imaging helps to assess the relationship of the elongated styloid process and pharyngeal space and vital structures



CBCT – Axial sections showing the distance between the tip of styloid process and pharyngeal space Maximum intensity projection – coronal section showing length and angulation of the styloid process

3D reconstructed image

#### Discussion

- Stylocarotid syndrome (Eagle's syndrome) is due to the pressure of the elongated SP on the ICA, ECA, and sympathetic fibers characterised by pain and recurrent syncope provoked by neck rotation
- Chronic irritation, trauma, persistence of mesenchymal elements, ectopic calcification of stylohyoid ligament
- Women>Men; Age >40
- DD : Neuralgia, TMJ disorder, tonsillo-pharyngitis, otitis, impacted molar, cluster headache
- Radiographs Confirmatory tool
- 3D>> 2D radiograph such as superimposition of anatomical structures
- 3D CT, CBCT provides accurate information of length, angulation and anatomical relation
- Conservative Management : NSAIDs, local infiltration of steroids/analgesics, Surgical Management : Extraoral approach/intraoral approach

#### Conclusions

Three dimensional imaging like CT/CBCT is the most preferred diagnostic tool in Eagle's syndrome along with a detailed examination.

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#### References

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