

A tender lump in the neck



1: Computed tomography scan showing an abscess in the left lobe of the thyroid and the presence of air (arrow).



2: X-ray of the cervical spine (lateral view) showing soft tissue swelling in the anterior part of the neck and the presence of air (arrow).

A 40-year-old woman presented with sudden onset of a painful neck swelling, fever and dysphagia. Examination revealed a warm, tender lump in her thyroid gland. Five weeks previously, she had had an abdominal hysterectomy with bilateral salpingo-oophorectomy for pelvic inflammatory disease. There was no evidence of leukopenia or diabetes. Computed tomography and x-ray images were consistent with a diagnosis of thyroid abscess (Figure 1 and Figure 2).

Anaerobic culture of a fine needle aspiration of pus confirmed the presence of *Bacteroides fragilis*. After failing twice to resolve the lump by aspiration, and incision and drainage, a left thyroid lobectomy was performed, with a satisfactory outcome. Antibiotics cefotaxime and metronidazole were administered after operation.

There are about 400 cases of acute suppurative thyroiditis reported in the medical literature,¹ but *Bacteroides fragilis* as the causative agent has been documented only once before.¹ More than two-thirds of the women and half of the men with acute

suppurative thyroiditis have pre-existing thyroid disease.² Acute suppurative thyroiditis may be secondary to bronchial cleft fistula, pyriform sinus fistula, thyroglossal duct, HIV/AIDS, diabetes, or leukaemia.^{1,2}

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