

An osseous cause of dysphagia

A 79-year-old man presented with painless dysphagia. Results of an oesophagogastroduodenoscopy were unremarkable. A dynamic videofluoroscopic examination was diagnostic, revealing hypertrophic cervical osteophytes indenting the hypopharynx and oesophagus. The osteophytes were also seen on a lateral cervical spine radiograph (Box). The dysphagia responded to dietary modification.

Although cervical osteophytes are seen in 20%–30% of the geriatric population, they are an unusual (and treatable) cause of dysphagia. Dysphagia occurs because of mechanical blockage as well as inflammation of the peripharyngeal and peri-oesophageal tissue. As enlarged cervical osteophytes may be an incidental finding, it is important to exclude other potential causes, such as neoplasm.^{1,2}

Shoaib Faruqi, Registrar

Muthu Thirumaran, Registrar

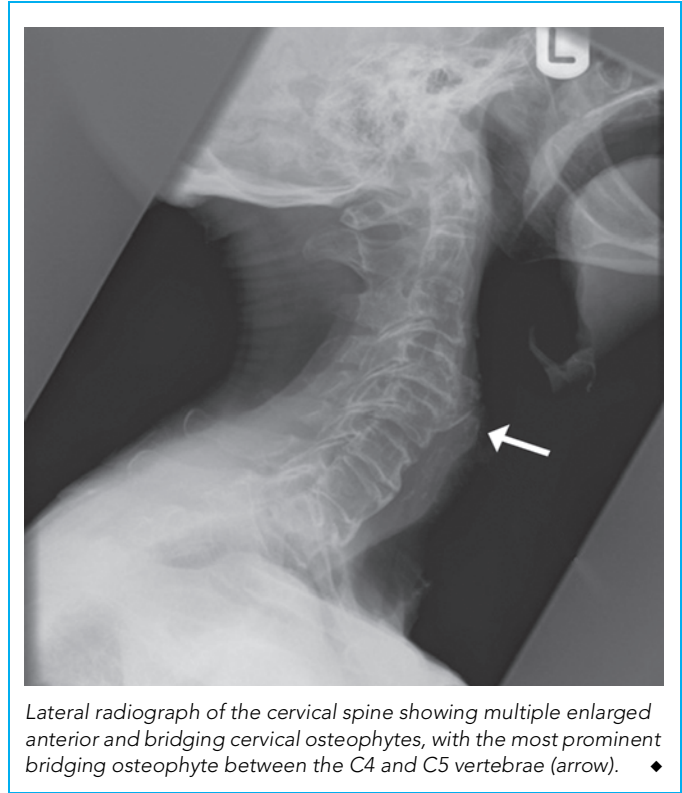
Parry Blaxill, Respiratory Physician

Department of Respiratory Medicine, Pinderfields General Hospital,
Wakefield, West Yorkshire, UK.

sfaruqi@doctors.net.uk

1 Giger R, Dulguerov P, Payer M. Anterior cervical osteophytes causing dysphagia and dyspnea: an uncommon entity revisited. *Dysphagia* 2006; 21: 259-263.

2 Yutan E, Daras M, Koppel BS. Dysphagia due to cervical osteophytes. *Clin Imaging* 2001; 25: 262-264. □



Lateral radiograph of the cervical spine showing multiple enlarged anterior and bridging cervical osteophytes, with the most prominent bridging osteophyte between the C4 and C5 vertebrae (arrow). ♦