

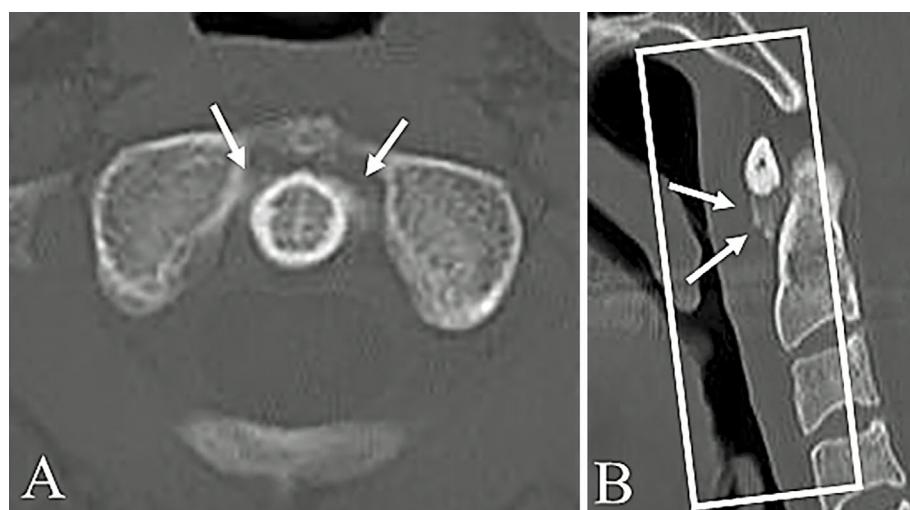
Acute Calcific Prevertebral Tendinitis

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Key words: acute calcific prevertebral tendinitis, computer tomography, neck pain, dysphagia

(Intern Med 56: 1611, 2017)

(DOI: 10.2169/internalmedicine.56.8266)



Picture.

A 47-year-old Japanese man had been suffering from acute posterior neck pain for the previous 2 days. He visited our outpatient department because he had limited neck mobility and was unable to sleep well due to this pain. The posterior neck pain became exacerbated when swallowing, and he also had dysphagia.

Computed tomography scans showed light calcification on the anterior surface of the axis below the atlas (Picture A, arrows), with edematous changes in the retropharyngeal space (Picture B, arrows inside the box). We diagnosed his condition as acute calcific prevertebral tendinitis, and we administered a non-steroidal anti-inflammatory drug. His symptoms thereafter disappeared 1 week later.

Acute calcific prevertebral tendinitis is caused by an inflammatory reaction of the longus colli muscle due to the absorption process of hydroxyapatite which is deposited in the tendons of this muscle (1). Acute calcific prevertebral tendinitis is characterized by calcifications on the anterior surface of the odontoid process, as observed on either a sim-

ple radiograph or computed tomography scan (2).

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

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Received for publication September 15, 2016; Accepted for publication September 19, 2016

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