Dysphagia Caused by Ossification of the Cervical Anterior Longitudinal Ligament

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Case Report

Patient: 57-years-old male
Chief complaint: Dysphagia, even to liquid, that has progressed for 5 months
Physical examination: Pain and motion limitation of neck
Past medical history: He did not have a specific history of diabetes, hypertension and trauma.
Radiologic findings: Simple lateral radiography showed ossification of the anterior longitudinal ligament (OALL) at the level of C3-C5 (Figure 1A). Computed tomography images revealed compression of oropharynx and esophagus caused by OALL (Figure 1B, arrows).

Clinical course: He underwent the removal of OALL by anterior approach. After surgery, the ossified mass was removed successfully and the distance between trachea and OALL was increased (Figure 1C, arrowheads). He recovered on full consistency diet 2 weeks after surgery.

Discussion

Osteophytes of cervical vertebrae including OALL are derived...
from degenerative changes usually remain clinically asymptomatic (1). Their incidences are common of the elderly population, but progression to dysphagia is rare. Dysphagia resulted from cervical OALL, although uncommon, is an treatable cause of dysphagia that must be identified (2).

References