



IMAGE IN OTORHINOLARYNGOLOGY

Symptomatic presentation of calcified triticeal cartilage

Presentación sintomática del cartílago triticeal calcificado

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The triticeal cartilage is centrally located in the hyothyroid ligament or on the posterior edge of the hyothyroid membrane. Its name comes from the Latin word *triticeus* (grain of wheat) due to its small, rounded shape. Its function is unknown, but it may be used to reinforce the lateral hyothyroid ligament. Calcification of the triticeal

cartilage is usually asymptomatic and occurs in 29% of males and 22% of females. It may present as an Eagle-like syndrome with dysphagia, cervicalgia, pharyngeal globe. Such a calcification detected on a simple x-ray requires differential diagnosis from pharyngeal foreign bodies, calcification of the upper edge of the thyroid or the larger tip of the hyoid,

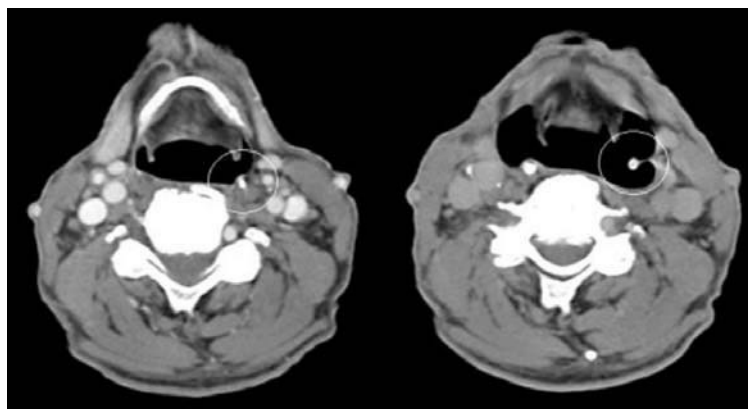


Figure 1 Computerized tomography of the neck: at rest, a point-like calcified image was noted (circle) in the posterior region of the left pyriform sinus which, when Valsalva's manoeuvre is applied, becomes surrounded by air with a membranous linking bridge.

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and even atheroma plaques on the internal carotid. It is the most frequent cause of radiological misdiagnosis of an atheromatous neck shot.

We report the case of a 63-year-old male, consulting due to the sensation of a foreign body and left pharyngeal odynophagia. His personal history includes chronic cervicalgia due to vertebral arthrosis, which had never given any pharyngeal symptoms. Fibroendoscopy revealed an atypical structure protruding into the left hemipharynx, between the thyroid cartilage, pyriform sinus and the vallecula.

In the computerized tomography of the neck (Figure 1), it is possible to observe a millimetric calcification behind the left pyriform sinus at rest which becomes surrounded by air, with a membranous linking bridge, when Valsalva's manoeuvre is applied. Consideration was given to a diagnosis of calcified triticeal cartilage or fracture of the cephalic pole of the upper edge of calcified thyroid cartilage.

A cervical x-ray (Figure 2) confirmed the diagnosis of calcified triticeal cartilage and a dense structure was seen between the larger tip of the hyoid and the upper horn of the thyroid cartilage, at the level of C3-C4.

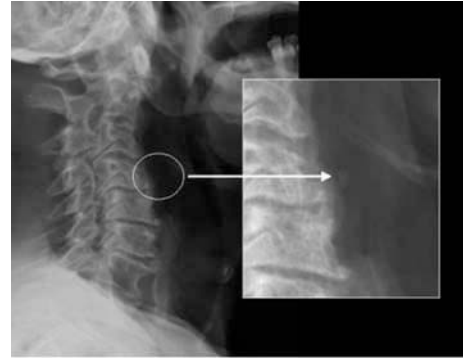


Figure 2 Oblique cervical x-ray in which it is possible to observe a dense structure between the larger tip of the hyoid and the upper horn of the thyroid cartilage, in the upper part of C4, corresponding to the calcified triticeal cartilage.

The origin of the symptoms and the possibility of surgical extirpation were explained to the patient, who refused surgery.