

IMAGES IN OTORHINOLARYNGOLOGY

Cervical chordomas

Cordomas cervicales

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Chordomas are dysontogenetic malignancies; they probably develop from ectopic embryonic remains of notochordal tissue. They are rare; they account for less than 1% of central nervous system tumours, 5% of primary malignant bone tumours and are even less common when located in the cervical spine. Histological differential diagnosis requires immunohistochemical tests. They are slow growing but locally very aggressive. Their treatment is complex, due to both the structures that they jeopardise and the difficult access and resection involved, as well as to their tendency to relapse.

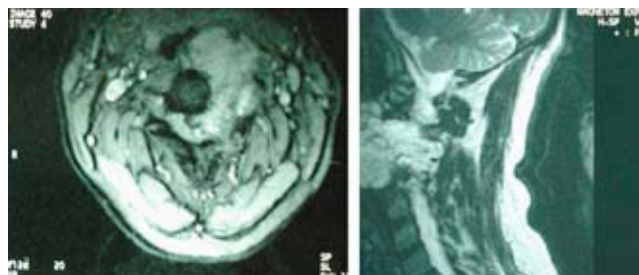


Figure 2

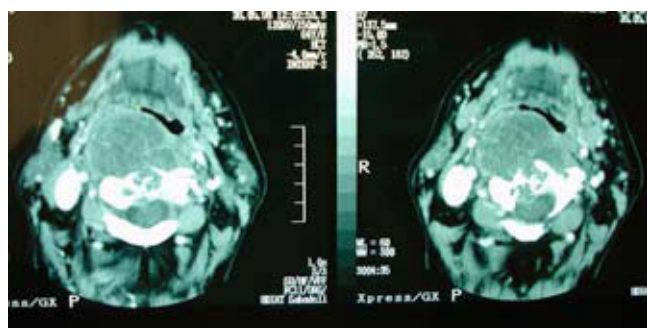


Figure 1

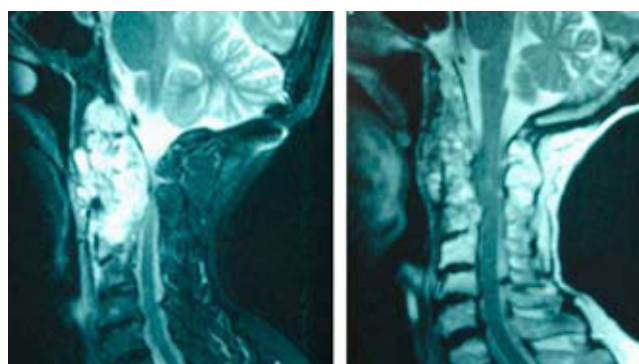


Figure 3

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We present images of two patients treated at our centre. The first patient (Figure 1) was a 55-year-old female, who came in because of a 3 month history of snoring and a feeling of a pharyngeal foreign body. The second case (Figure 2) was a 47-year-old male, who complained of a 9 month history of neck pain with radiation to the left shoulder and paraesthesia on the left side of the face.

The anatomopathological diagnosis was obtained through a transoral needle biopsy.

A tracheotomy was performed under local anaesthesia in both cases, with a posterior cervical approach for occipito-vertebral arthrodesis and a transmandibular-transoral approach for removal of the lesion (Figure 3). The patients were subsequently referred for proton radiotherapy.

Both patients were reoperated multiple times because of local tumour recurrences, progressively affecting the neighbouring structures. Death occurred after an evolution of 11 and 5 years, respectively.

We would like to emphasise the non-specificity of the first symptoms, the long evolution from the initial symptoms to the patient's consultation and how advanced the tumour was at the time of diagnosis.

Conflict of interest

The authors declare no conflict of interests.