

Acute prevertebral calcific tendinitis: a source of non-surgical acute cervical pain.

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Abstract

BACKGROUND:

Prevertebral calcific tendinitis results from calcium hydroxyapatite crystal deposits in the longus colli muscles, which induce symptoms similar to some surgically-treated conditions, such as retropharyngeal abscesses. Imaging techniques are critical for accurate diagnosis.

PURPOSE:

To describe the computed tomography (CT) findings associated with prevertebral calcific tendinitis.

MATERIAL AND METHODS:

Retrospective analysis performed in an 18-month period, searching for patients with neck CT and reports with diagnosis of "calcific longus colli tendinitis" or "prevertebral calcific tendinitis". CT images and clinical data available in the medical records were analyzed.

RESULTS:

One hundred and thirty-four examinations were performed in the period studied. Nine patients who fulfilled inclusion criteria were identified and their CT imaging characteristics are presented. Six presented with calcific deposits in the right longus colli muscle. CT matched the clinical pain lateralization in all cases. Eight patients had no significant enhancement post injection of contrast media.

CONCLUSION:

Prevertebral calcific tendinitis is a cause of acute cervical pain that clinically mimics a retropharyngeal abscess, however on neck CT has a characteristic appearance. Correct identification of this pathologic condition will help avoiding unnecessary invasive procedures.