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DEEP NECK INFECTIONS – RETROSPECTIVE STUDY AT THE DEPARTMENT OF OTORHINOLARYNGOLOGY, UNIVERSITY HOSPITAL PILSEN IN 2017-2021

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SUMMARY

Deep neck infection is still a serious, life-threatening disease today. It is characterized by affection of the parapharyngeal, retropharyngeal and other visceral spaces; the complex anatomy of the neck often makes it difficult to find the exact location of the infection. The spread of infection can lead to the development of mediastinitis, which worsens the prognosis of the patient.

AIM OF THE WORK

The aim of this work was to retrospectively evaluate a sample of patients treated for deep neck infection, to determine the success rate, characteristics and duration of treatment.

MATERIALS AND METHODS

Patients (n=40) with deep neck inflammation treated in 2017-2021 at the Dpt. of Otorhinolaryngology of the University Hospital in Pilsen were included in a retrospective, analytical study. The study population consisted of 11 females (27.5%) and 29 males (72.5%). The average age was 51 years. Deep cervical infection was diagnosed in all patients by CT scan, which was supplemented by MRI in indicated cases.

RESULTS

An overview of the etiology and localization of deep cervical infections in our patients is shown in Figures 1 and 2. The average length of hospital stay was 20 days, of which 10 days were in intensive care (Figure 3). 9 patients had mediastinal involvement (22.5 %) and the surgery was performed in collaboration with a thoracic surgeon. In patients with mediastinitis, the mean length of hospital stay increased to 39 days, from which 23 days in the intensive care unit (Figure 3). Surgical revision of the abscess was performed in all patients. 22 patients (55 %) underwent one operation, 10 patients (25 %) required one reoperation and 8 patients (20 %) underwent multiple reoperations. Despite all the provided therapy, we observed a lethal course of disease in 3 (7,5 %) patients, of which 2 with mediastinitis (Figure 4).

Figure 1 - etiology

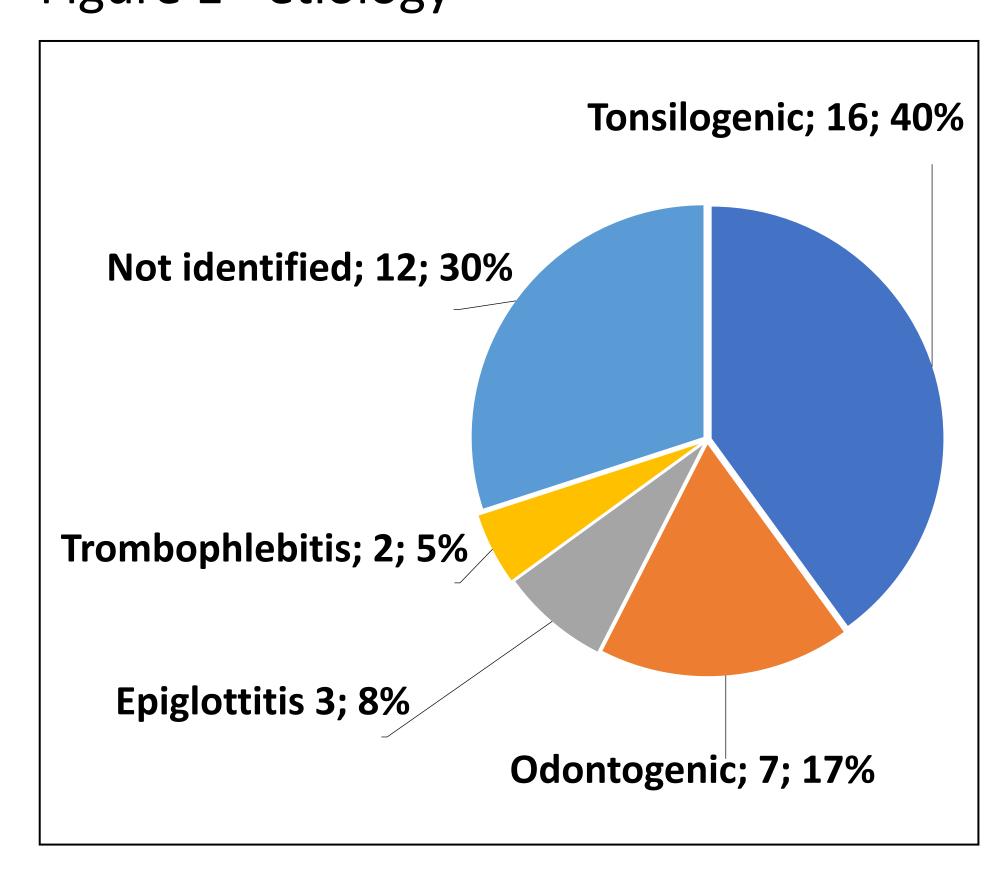


Figure 2 - localization

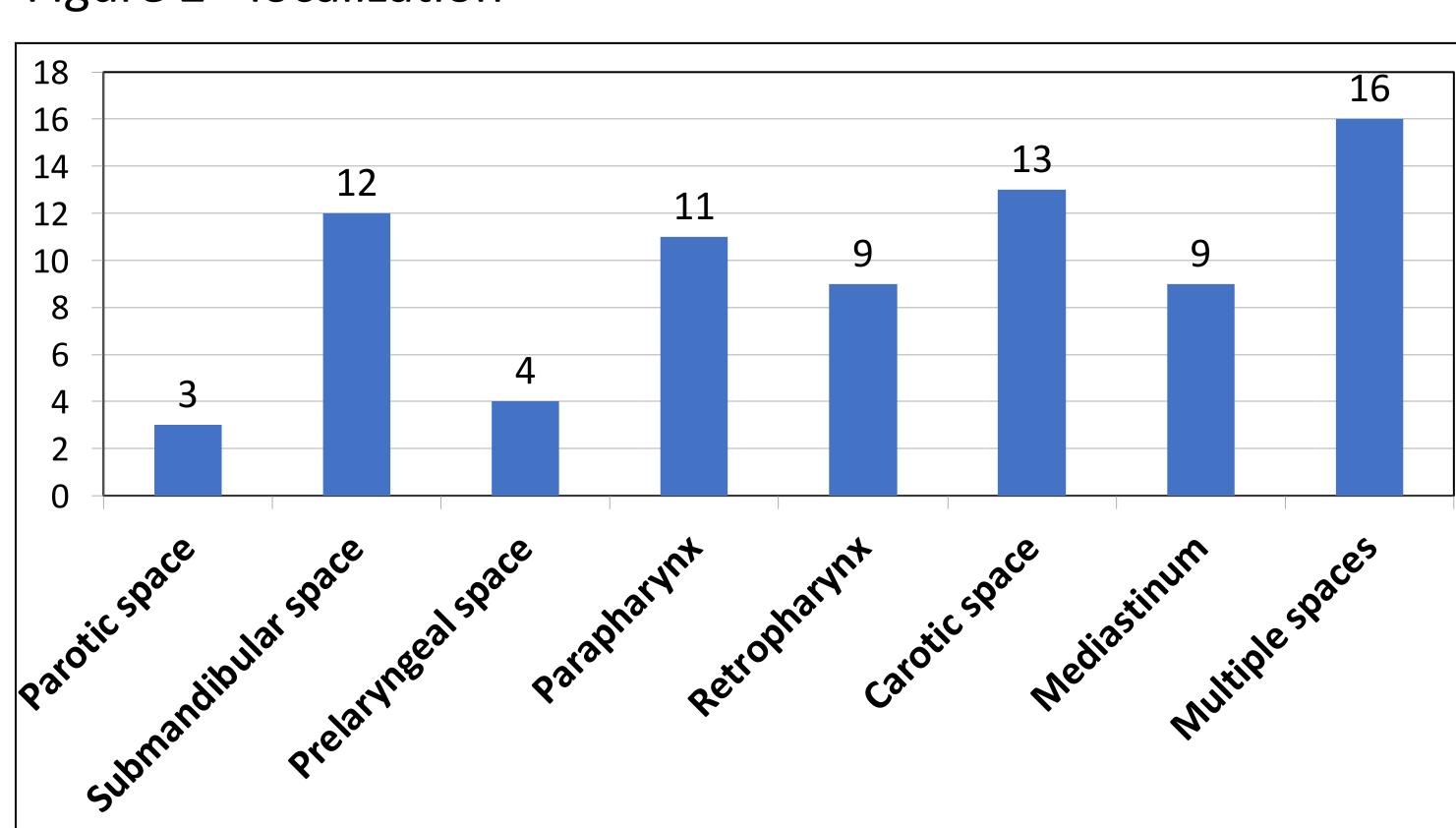


Figure 3 – length of hospital stay (days)

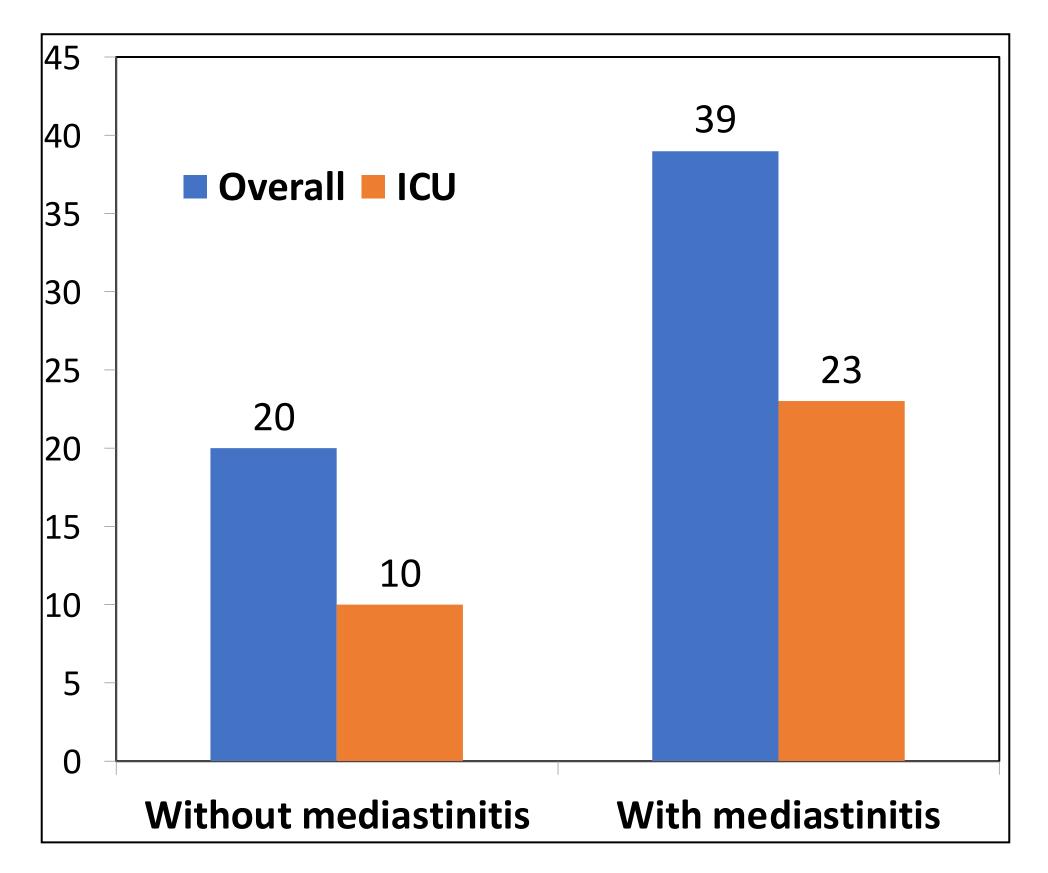
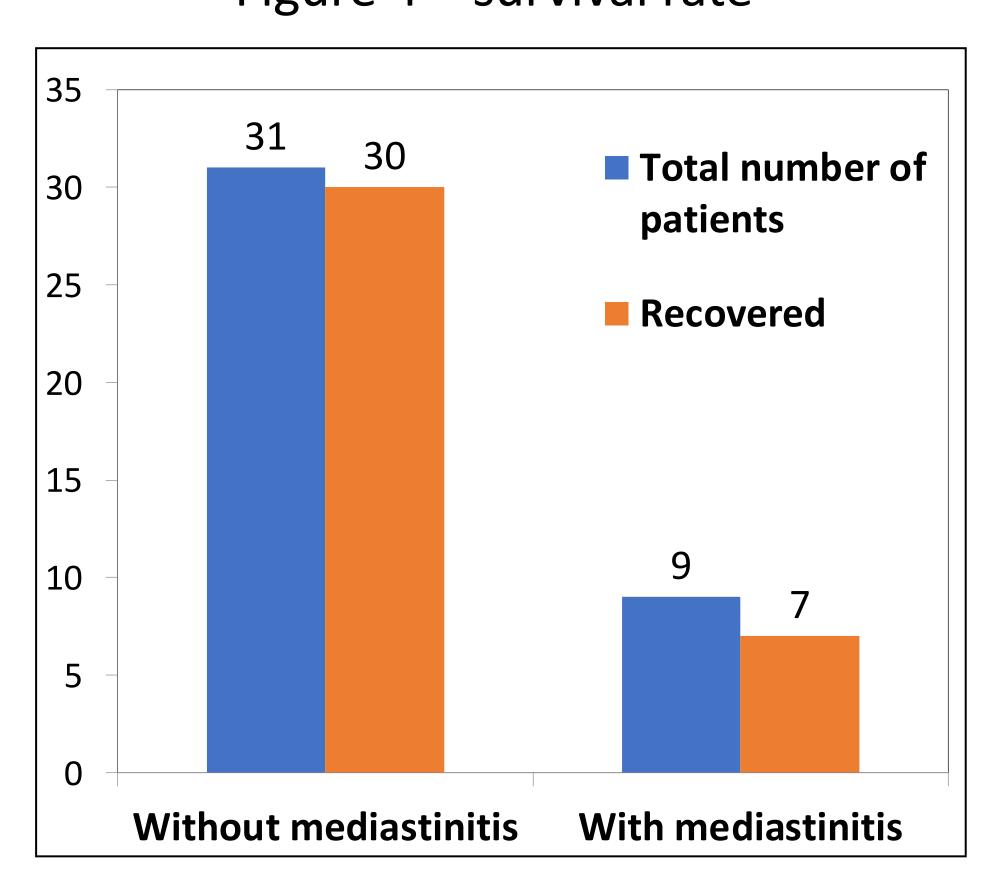


Figure 4 – survival rate



CONCLUSION

Rapid diagnosis, intensive antibiotic therapy, radical surgical intervention and a multidisciplinary approach are essential for successful treatment of deep neck infections.