



Disnea severa por pólipo gigante antrocoanal [

Sociedad Otorrinolaringológica de Castilla y León, Cantabria y La Rioja,
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text (article)

Analítica

Introduction: The antrochoanal polyp is a prevalent pathology in teenagers and young adults. It usually presents with nasal obstruction. **Patient and method:** Case report: An 80-year-old male with alcoholic encephalopathy, chronic bronchial disease of unknown etiology and polypoid chronic rhinosinusitis came to the emergency service with severe dyspnea without laryngeal features. Anterior rhinoscopy showed a polypoid mass in left nostril that prevented the visualization with nasal endoscopy. Examination of the mouth revealed a large polypoid mass involving nasopharynx and extends to hypopharynx until the laryngeal side of epiglottis. CT was requested urgently. Results CT demonstrated an almost complete opacification of the left maxillary sinus, left complex ethmoid cells and the presence of a soft-tissue mass, passing through the maxillary ostium into the posterior nasal cavity and choana. Mass caudal extension was located close to the laryngeal surface of the epiglottis and partially occupying the laryngeal vestibule conditioning the air way. Functional endoscopic sinus surgery was performed urgently with clinical remission. **Conclusions** In case we are treating a patient with severe dyspnea, we must determinate the etiology and localization of it, in order to decide the best treatment option. Dyspneas features dismissed the laryngeal site. Complementary image studies give us information about the extension. Antrochoanal polyp cases causing dyspnea are unusual, but we must think of it, or in pharyngeal formations, every time dyspnea improves with a cervical extension

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