Answer: A calcified laryngeal cartilage

The lateral view radiograph of the neck shows irregular calcification (Panel), from the level cervical vertebrae C5 until C6. However, no air pocket can be seen. There was also no significant increase in the width of the posterior pharyngeal wall soft tissue.

Hyaline cartilage has the tendency to undergo calcification. In the laryngeal framework, the thyroid, cricoids, and most of the arytenoids cartilages are hyaline cartilage. The process of calcification usually starts at about 18 years of age. However, the degree of ossification varies between the age of an individual and the stages of calcification. Although commonly affecting the thyroid and cricoids cartilages in both gender, the degree of calcification appear to be less in female, usually commencing in the late teens or early twenties. Calcification or ossification of the arytenoid begins shortly after that of the thyroid and cricoid cartilages. In the index case, the calcification shown is mimicking an opaque foreign body in view of the rare occurrence in such a young age female.

The patient was taken for examination under anaesthesia in view of persistent symptom. Although we are certain that the opacity is due to the calcified cartilages; non-opaque foreign body that is not clearly seen by x-ray with significant symptom must to be addressed by direct vision. In uncertain cases, a lateral view during swallowing is helpful. The calcified cartilage will move upward during swallowing unlike the foreign body which will stay unchanged. Provision of a frontal view x-ray as comparison is recommended to confirm the opacity is due the calcification and not the foreign body.

In general, laryngeal calcification generally remains asymptomatic and clinically less or not relevant if it is incidentally found on imaging. However, its presence may mimics foreign body, especially in cases when the patient presenting with acute symptom with no previous image available as a baseline investigation. In rare cases, the calcified cartilages may produces symptoms related to the voice other than dysphagia.

REFERENCES