

Abducens Nerve Palsy in Petrositis: A Report of Three Cases

Avantika Singh*, AshishVashishth**

VMMC & Safdarjung Hospital, New Delhi, India

E-mail: avantika.sjh@gmail.com

Background

Nowadays, antibiotics are widely available and they can decrease the incidence of petrositis to approximately 2 per 100,000 children with acute otitis media. However, if left untreated, the condition may lead to morbidity and mortality from meningitis, brain abscess and lateral sinus thrombophlebitis. Petrositis may be associated with acute or chronic otitis media, as a result of spread of infection from the middle ear cleft to the petrous apex through perilyabyrinthine and peritubal air cells. This study was done to discuss the management and outcome of abducent nerve palsy in petrositis associated with otitis media.

Case Report

This is a clinical report of three patients with petrositis and abducent nerve palsy. Computed tomography (CT) scans of the temporal bone demonstrated soft tissue

opacification and expansion of mastoid and petrous air cells without bony erosion. Two patients recovered completely from diplopia on medical management. One patient underwent transcanalinfacochlear drainage of the petrous apex after non-responsiveness to medical treatment. All patients had complete resolution of abducent nerve palsy.

Discussion

With advances in antibiotics, medical treatment should initially be offered to all patients with petrositis. Surgical intervention should be reserved for patients not responding to medical management. A transcanalinfacochlear approach is an effective drainage route for apical petrositis with complete recovery of the sixth nerve and hearing preservation.

Key words: Petrositis; Sixth nerve palsy; Otitis media.