Factors influencing extent of surgery for Substernal Thyroid Goiters: Hemithyroidectomy versus total Thyroidectomy

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Background: When compared to removal of cervical goiters, patients undergoing removal of substernal goiter have been found to have higher rates of complications, including recurrent laryngeal nerve injury, bleeding, and hypoparathyroidism. Previous literature has discussed hemithyroidectomy versus total thyroidectomy for cervical goiters showing that the less invasive ...

A surgical challenge for primary hyperparathyroidism: Intravagal parathyroid adenoma

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A missed parathyroid adenomas are the most common cause of surgical failure in persistent primary hyperparathyroidic patients. Abnormalities in the normal migration of the parathyroid glands during embryological development of the head and neck may result in considerable variability in the location of parathyroid tissue. Imaging studies were crucial in localizing the n ...

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Four cases of extracranial abscess caused by sinusitis exacerbated by a foreign body

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Background: Foreign bodies in the paranasal sinus is a relatively rare. Furthermore, most of foreign bodies in the paranasal sinuses occur in the maxillary sinus, and reports of foreign bodies in frontal sinus are few. Extracranial abscesses caused by sinusitis with foreign bodies is a rare, but it sometimes cause serious complications. We report four cases of extracranial abscesses caused by sinusitis with foreign bodies. The patient had a severe headache and fever, and CT showed an abscess in the paranasal sinus. Treatment with antibiotics and drainage resulted in a resolution of symptoms.

A case of apogeotropic horizontal canal benign paroxysmal positional vertigo (cupulolithiasis) due to head contusion in an adolescent

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A 17-year-old high school boy who complained of severe positional vertigo visited our hospital. He belonged to an American football team in high school, and his head often hit opponents during games. The vertigo was strongest when his left ear was down in the supine position. Physical examination and computed tomography revealed no abnormalities. However, positional testing revealed the characteristic symptoms of benign paroxysmal positional vertigo. The patient was treated with positioning exercises and the symptoms improved.