**Case report:**

**Preauricular sinus - an unusual presentation**

Dr Vinod Shinde, Dr Mayur Ingale, Dr Rishank kishore, Dr Sharad Rawat

Department of ENT, Dr D Y Patil Medical College and Hospital, Pimpri, Pune
Corresponding author: Dr Mayur Ingale

Abstract:
Preauricular sinus is a common congenital anomaly which is usually asymptomatic and noted on routine otolaryngological examination which requires no treatment. Herewith we presented a case of 21 year old boy presented with swelling and pain in the left post aural region of 10 days duration. He gave history of 3 episodes of abscess in the left post aural region since past 2 years for which he was treated by incision and drainage with antibiotics. He also gave history of swelling in the ascending limb of helix whenever there was postauricular abscess.

The audiological examination was normal and the X-ray mastoid Schuller’s view showed a normal pneumatised mastoid air cells. The patient was treated with antibiotics and analgesics and improved. He was provisionally diagnosed as a case of infected postaural sebaceous or dermoid cyst. Any patient presenting with recurrent postauricular abscess without any pathology in mastoid, should be suspected to have preauricular sinus. Excision of abscess and extirpation of sinus tract under antibiotic control is the line of treatment.

Keywords: Preauricular sinus, Schuller’s view

Introduction:
Preauricular sinuses are frequently noted on routine physical examination as small dells adjacent to the external ear, usually at the anterior margin of the ascending limb of the helix. However, preauricular sinuses have been reported to occur along the lateral surface of the helicine crus and the superior posterior margin of the helix, the tragus, or the lobule. Anatomically, preauricular sinuses are lateral and superior to the facial nerve and the parotid gland. Preauricular sinus is a common congenital anomaly which is usually asymptomatic and noted on routine otolaryngological examination which requires no treatment. Patients presenting with discharge, recurrent infections and preauricular abscess will require management with antibiotics and surgical extirpation of the sinus tract.

Case Report:
Herewith we presented a case of 21 year old boy presented with swelling and pain in the left post aural region of 10 days duration. He gave history of 3 episodes of abscess in the left post aural region since past 2 years for which he was treated by incision and drainage with antibiotics. He also gave history of swelling in the ascending limb of helix whenever there was postauricular abscess.

The audiological examination was normal and the X-ray mastoid Schuller’s view showed a normal pneumatised mastoid air cells. The patient was treated with antibiotics and analgesics and improved. He was provisionally diagnosed as a case of infected postaural sebaceous or dermoid cyst.
Discussion:
Preauricular sinus is a common congenital anomaly in children which was first described in 1864 by Heusinger. Various terms like preauricular pit, preauricular fistula, preauricular tract and reauricular cyst are used synonymously with this condition. It has an estimated incidence of 0.1-10% with higher incidence among Asians and Africans.

The real problem in the surgical treatment of preauricular sinus is the high recurrence rate following standard techniques due to the high variability of the sinus ramifications, particularly of the terminal ramifications which are difficult for the surgeon to follow. Furthermore, infectious episodes, possibly with abscess, can produce scars that further alter the sinus route. The pre- and intra-operative
precautions, aimed to reduce this trend, are often not sufficient to guarantee absence of pathological recurrence. Data in the literature confirm the limited efficacy of the standard technique.

Conclusion:
Any patient presenting with recurrent postauricular abscess without any pathology in mastoid, should be suspected to have preauricular sinus. Excision of abscess and extirpation of sinus tract under antibiotic control is the line of treatment.

References: