

Parapharyngeal abscesses.

Sethi DS¹, Stanley RE.

Author information

Abstract

Fifty-five patients with deep neck infections treated consecutively over a period of six and a half years between January 1983 and July 1989 were reviewed. Nine of these patients had abscesses localized to the parapharyngeal space and form the basis of this study. The aetiology of the parapharyngeal abscess was odontogenic in two patients and remained unknown in the other seven. Five patients had associated systemic disease; four were diabetics and one patient had non-Hodgkin's Lymphoma. High dosage intravenous antibiotics directed towards the causative micro-organisms, airway control and early surgical intervention was the mainstay of treatment. All patients underwent open surgical drainage of the parapharyngeal abscess within 24 h of admission. Bacteriology results showed *Klebsiella* sp. to be the dominant micro-organism cultured in four patients. Morbidity was low; seven patients had no post-operative complications and were discharged from the hospital between 7-24 d (mean 12.9 d). There were two deaths. Early open surgical drainage remains the most appropriate method of treating parapharyngeal space infections; it avoids life threatening complications with rapid recovery.