Facial asymmetry: silent sinus syndrome

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DESCRIPTION

A 23-year-old woman presented to the primary care clinic with a 10-month history of progressive left facial asymmetry, sinking of left eye and deepening of the superior palpebral sulcus. She denied headache, periocular pain, double vision, scalp or face tenderness. Her medical history was negative for sinus tumours, trauma, surgery or allergic rhinosinusitis. Physical examination showed left-sided enophthalmos with hypoglobus, sunken sulcus appearance to the left upper lid and left-sided deviation of the nasal septum with no obvious infection, the rest of ophthalmic examination was intact. CT of the orbits and sinuses (figure 1) revealed left enophthalmos, downward retraction of the orbital floor, total mucosal opacification and reduced volume of the left maxillary sinus. Diagnosis of silent sinus syndrome was made.

Figure 1 CT of the orbits and sinuses reveals left enophthalmos, downward retraction of the orbital floor, total mucosal opacification and reduced volume of the left maxillary sinus.

The patient was managed with endoscopic sinus surgery to drain and aerate the left maxillary sinus, to repair the left orbital floor and to correct the hypoglobus and enophthalmos. Microscopic examination of the antral mucosal specimen showed mild chronic inflammatory changes with no bacterial growth. Her postoperative recovery was uneventful, on 3-months follow-up; she reported complete resolution of symptoms with no recurrence.

Learning points

- ▶ Silent sinus syndrome (SSS) is a rare disorder that is defined as spontaneous and gradual retraction of the maxillary sinus.^{1–3}
- ▶ Symptoms are usually unilateral and include orbital asymmetry, deepening of superior sulcus, sinking or pulling sensation of the eye, lid lag or nasal shift toward the affected sinus.
- ▶ Early recognition and appropriate management of SSS would significantly protect orbital and maxillary sinuses from destruction and collapse and halt further complications.

Competing interests None.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

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