Pott’s puffy tumour: an unforgettable complication of frontal sinusitis

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DESCRIPTION

First described by Sir Percival Pott in 1768, Pott’s puffy tumour is a subperiosteal abscess of the frontal bone associated with underlying frontal osteomyelitis. It occurs most frequently as an adverse sequelae of head trauma but can also arise in the setting of frontal sinusitis, as a postoperative complication following craniotomy, or from the spread of infection from adjacent sites, such as dental sepsis.1

Since the advent and widespread prescription of antibiotic therapy, Pott’s puffy tumour has become a rare entity, largely confined to individual case reports2-3 or small case series.1

We report the case of a 63-year-old man who presented with a 2-week progressive history of a forehead swelling with frontal and retro-orbital pain. Notably, he had a background of chronic rhinosinusitis with nasal polyposis, treated previously with endoscopic sinus surgery and polypectomy some 4 years prior, and described an exacerbation of his sinonasal symptoms over the proceeding weeks.

On examination a large, fluctuant swelling was seen protruding dramatically from the frontal region (figure 1). CT scanning revealed pansinusitis with erosion and fibrillation of the frontal bone in keeping with osteomyelitis (figures 2 and 3). An 11 mm defect in the outer table the left frontal sinus with overlying subcutaneous collection was noted on the corresponding MRI.

External drainage of the abscess was performed under ultrasonic guidance and culture revealed profuse growth of Streptococcus milleri. Following an extended course of treatment with coamoxiclav, the patient underwent definitive revision endoscopic surgery.

Figure 1 Clinical image, taken from the patient’s left side, showing a large swelling protruding dramatically from the frontal region. The patient concerned has given written permission for the presentation here of both his case and this image.

Figure 2 CT images, axial and sagittal slices, respectively, showing pansinusitis with extensive osteomyelitic erosion of the frontal bone.

Figure 3 CT images, axial and sagittal slices, respectively, showing pansinusitis with extensive osteomyelitic erosion of the frontal bone.
Contributors SPW was involved in the conception, planning, drafting and revision of the work. MDW was involved in the conception, planning and revision of the work.

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REFERENCES