IMAGES

Pott's Puffy Tumor after Head Trauma

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A previously healthy 43-year-old male presented two weeks after head trauma. He complained of worsening headache with swelling of the forehead and the left periorbital area, purulent discharge from the left eye, and rhinorrhea that began a few days prior to presentation. CT of the head and maxillofacial bones are shown below. He underwent incision and drainage of his abscesses. Operative cultures grew streptococcus intermedius and coagulase-negative staphylococcus. He was sent home on a six-week course of oral clindamycin and intravenous ceftriaxone, based on sensitivities.

Discussion

Pott's puffy tumor was first described by Pott in 1760.[1] It is due to osteomyelitis of the frontal bone with subperiosteal abscess formation. The prevalence is unknown, but it is more common in adolescents and often associated with chronic sinusitis or trauma.[2] It is rare, especially in the antibiotic era. The risk of intracranial complications is high and includes meningitis, epidural or subdural empyema, brain abscess, and cavernous sinus thrombosis. Treatment is usually with long term antibiotics and surgical drainage.

References

[1] Pott P. Observations on the Nature of Consequences of Wounds and Contusions of the Head, Fractures of the Skull, Concussions of the Brain. London, UK: Hitch & Lowes, 1760.

[2] Forgie SE, Marrie TJ. Pott's puffy tumor. Am J Med 2008; 121(12):1041-1042. PMID: 19028195.