

Sudden deafness due to lipiodol retention: unusual high density nonmetallic findings on CT

A 63 years old woman presents to otorhinolaryngologist with sudden unilateral sensorineural hearing loss and underwent a CT scan of the head, which ruled out a cerebral infarction. However, CT revealed five high density (nearly 380 Hounsfield units; more than the iron) spherical objects in the subarachnoid space, one of which located at the emerging of the left acoustic nerve from the petrous, and compressing it as shown in figure (FIGURE 1). Other radiological findings were compatible with the age of the patient. A previous abdomen CT scans had shown similar findings in lumbar vertebral canal, in subarachnoid space which had not been evaluated (FIGURE 2). Her clinical history was negative for trauma or surgery, but was notable for chemoembolization of a hepatocellular carcinoma, 6 years before. This extremely dense object is compatible with Lipiodol retention, a rare complication of such intervention [1]. On the other hand, localizations in the subarachnoid space are typical of a myelography [2], but there was no evidence of such intervention in the patient history. A neurosurgical consultation was performed, but the object was too close to the nerve to be removed. Patient adapted to hear with the contralateral ear and by now, she has not developed any other symptoms. A radiological follow up was considered, but in absence of an available therapy we preferred a wait and see approach.

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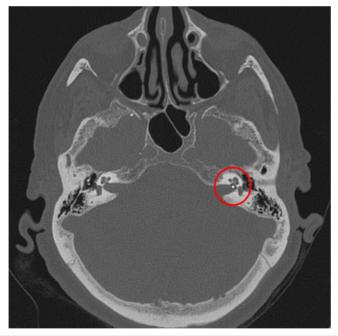


FIGURE 1.

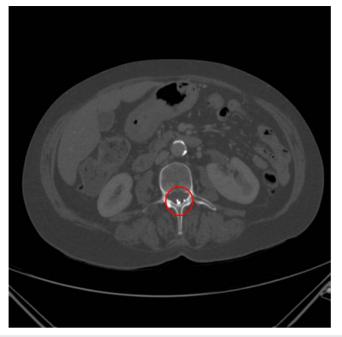


FIGURE 2.

REFERENCES

1. Zhijun W, MingDe L, David L et al. 3D volumetric evaluation of lipiodol retention in hcc after chemoembolization: A quantitative comparison between CBCT and MDCT. *Acad. Radiol.* 21, 393-399 (2014). Peterson HO. The hazards of myelography. *Radiology*. 115, 237-239 (1975).