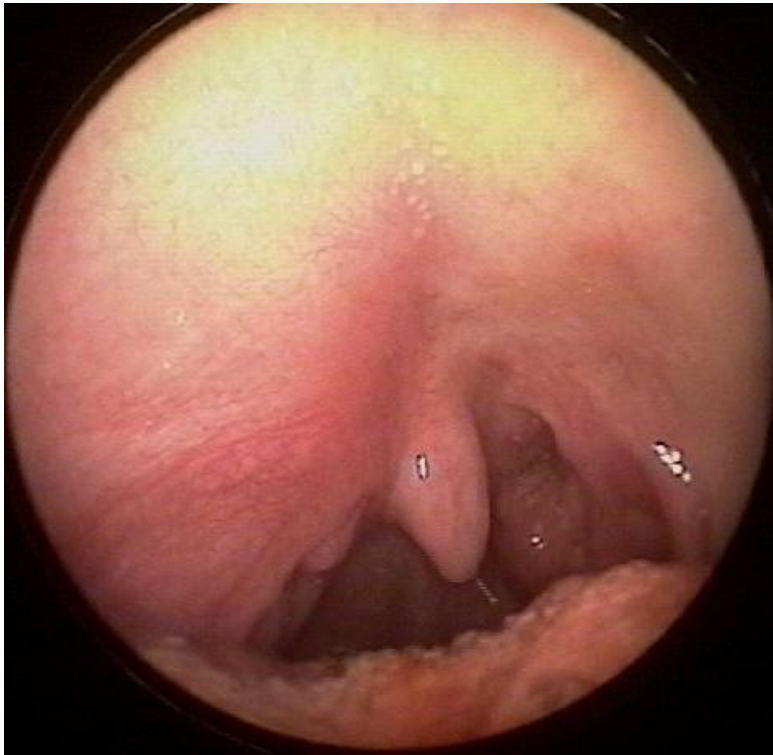


PERITONSILLAR ABSCESS



Clinical Features

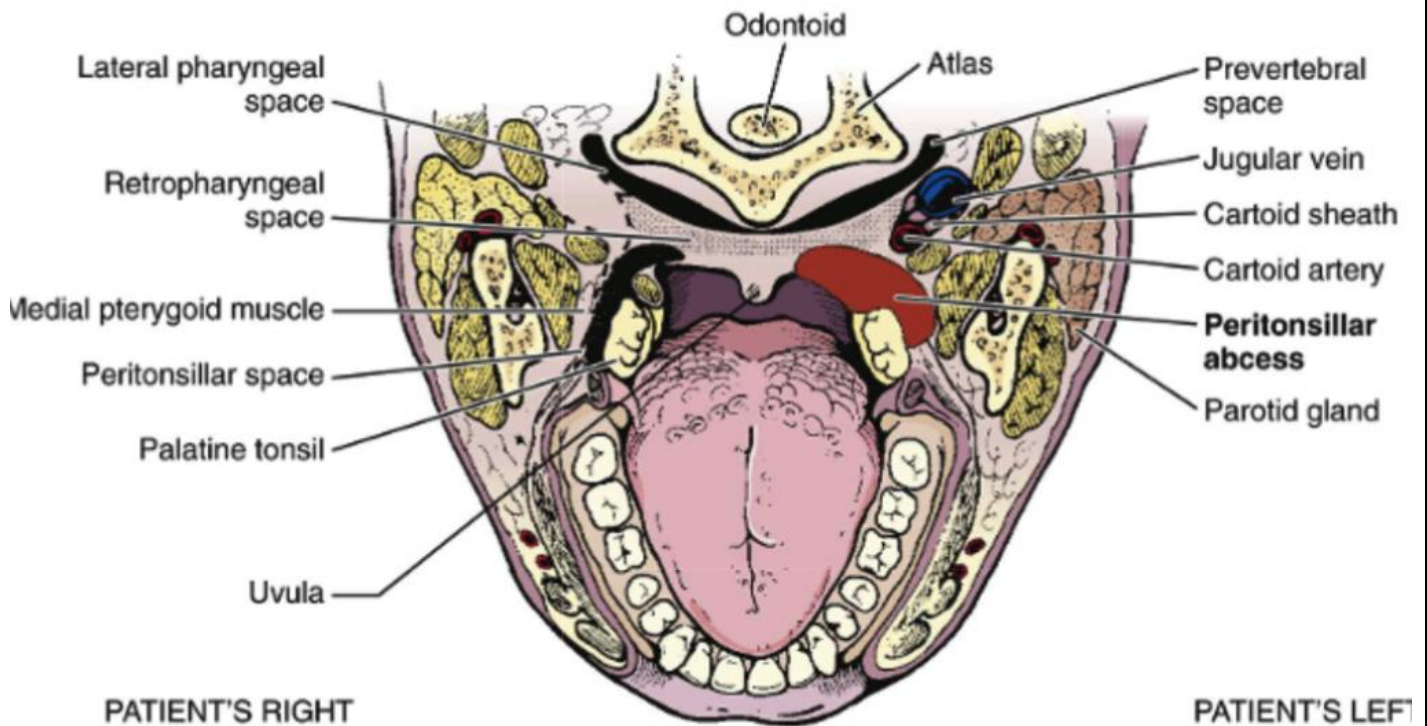
Complications (nearby structures, see pic)

Sore throat	Airway obstruction
Fever	Sepsis
"Hot potato" muffled voice	Internal jugular vein thrombosis
Drooling	Carotid artery rupture
Trismus (reflex spasm of internal pterygoid)	Carotid artery pseudoaneurysm
Ipsilateral neck pain/swelling	
Ipsilateral ear pain	
Enlarged tonsil with large surrounding swelling	
Deviation of the uvula	
Cervical lymphadenopathy	

A peritonsillar abscess is a collection of pus located between the palatine tonsillar capsule and the pharyngeal muscles. It is usually preceded by tonsillitis or pharyngitis and progresses from cellulitis to phlegmon to abscess.

Infection is usually polymicrobial but group A *Streptococcus* or *Staphylococcus aureus* may be predominant.

Regional Anatomy



Management

- Secure the airway if obstruction is imminent - call anaesthetics and ENT .
- Take blood cultures and provide IV fluids if septic.
- Administer IV Benzylpenicillin.
- Refer to ENT for admission and either aspiration or incision and drainage.

