



Salmonella from a Neck Abscess of a Patient Recently Diagnosed with Nasopharyngeal Cancer: A Case Report

Albert G. Abunaga, MD¹, Ma. Tarcela S. Gler, MD²

Department of Medicine, Section of Infectious Diseases, Makati Medical Center, Philippines



INTRODUCTION

Salmonella is an Enteroinvasive bacterium that can lead to a variety of clinical diseases. The most common presentation is gastroenteritis, but extraintestinal manifestations can occur when the organism enter the bloodstream. While neck abscesses have multiple bacterial causes, Salmonella is a relatively rare culprit

CASE PRESENTATION

In this paper, we report a 61-year old male presenting with 1-month history of enlarging right anterolateral neck mass without diarrhea, abdominal pain, or vomiting. Patient sought consult with an ENT wherein CT scan of the neck revealed 4 x 3.9 x 6.6 cm heterogeneously enhancing soft tissue mass with some areas of necrosis in the right anterolateral neck. Patient was advised admission for Incision and Drainage of Right Lateral Neck Abscess and Incisional Biopsy of Right Lateral Neck Node Mass with Neck Exploration. Specimens were obtained wherein *Klebsiella pneumonia* and *Salmonella paratyphi C* were isolated from the abscess. Routine Histopathology of the neck mass showed soft tissue with poorly differentiated carcinoma. Further immunohistochemistry revealed a Non Keratinizing Squamous Cell Nasopharyngeal Carcinoma. Patient was then given Levofloxacin 750mg tablet once daily for total of 10 days.



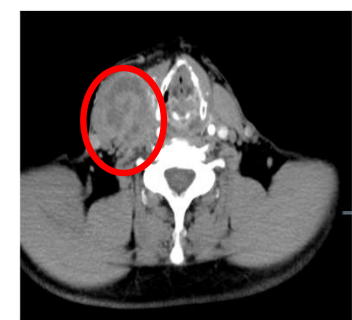
Right anterolateral neck mass prior to surgery



CT scan of neck with contrast (Coronal View)



CT scan of neck with contrast (Sagittal View)



CT scan of neck with contrast (Axial View)

CONCLUSION

Although uncommon, Salmonella should be included in the differential diagnosis of neck abscesses, particularly in patients with underlying immunocompromising conditions such as malignancy. Having an immunocompromised condition increases the likelihood of severe and disseminated Salmonella infections. Effective management includes high index of suspicion, radiologic tests, prompt surgical intervention, and accurate microbiological identification.