🖗 Thieme

A "balloon" inside the mouth



▶ Fig.1 Laryngeal vallecula view with a nasopharyngeal fiberscope. When the patient strained her tongue forcefully, a "balloon" suddenly appeared on the right side, from behind the base of the tongue.

A 29-year-old woman found what looked like a balloon inside her mouth when she checked her mouth with a mirror after a dental check-up. There was no symptom except the "balloon" behind her tongue; she was surprised and worried about the strange experience. She had no history of drinking or smoking.

We examined her using an oral pharyngeal scope [1] and at first could not find any abnormality inside her mouth. However, when she answered "OK," she strained her tongue forcefully and the "balloon" suddenly appeared on the right side behind the base of the tongue (**> Video 1**).

Using an electrolaryngeal fiberscope, the "balloon" appeared from her vallecula when she strained her tongue (> Fig. 1) and did not appear at any other time. During Valsalva maneuvers (> Fig. 2) the balloon disappeared, which suggested that air filled sacs did not communicate with the laryngeal lumen. Computed tomography imaging (> Fig. 3) showed an air-filled space between the base of the tongue and the epiglottis.

The most common congenital laryngeal cysts include saccular cysts, laryngoceles, and ductal cysts [2,3]. A saccular



Video 1 A "balloon" inside the mouth. We could not find any abnormality inside the mouth while observing with an oral pharyngeal scope. When the patient strained her tongue forcefully, a "balloon" suddenly appeared on the right-side, behind the base of the tongue.



▶ Fig.2 Laryngeal vallecula view with nasopharyngeal fiberscope. During Valsalva maneuvers the "balloon" disappeared.

cyst closed from the laryngeal lumen

presents as a cyst of the lateral larynx,

the so-called congenital cyst or lateral

saccular cyst [2]. Our suspected diagno-

sis was thyro-tongue duct cyst. Com-

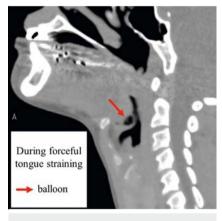
plete resection for such cases is recom-

mended as the surgical outcome is excel-

lent [3]. However, after 12 years, the

patient has never agreed with surgery

because her child was still young and



▶ Fig. 3 Computed tomography showed an air-filled space (arrow) between the base of the tongue and the epiglottis.

the "balloon" caused no ill effects over these 12 years.

Endoscopy_UCTN_Code_CCL_1AB_2AB

Competing interests

None

The authors

Koichi Tsunoda¹, Naoaki Ishikawa², Mihiro Takazawa³, Kazuyo Yagishita⁴, Sota Oguro⁵

- 1 Artificial Organs and Medical Creations, Otolaryngology, National Hospital Organization Tokyo Medical Center, Tokyo, Japan
- 2 Otolaryngology, National Hospital Organization Tokyo Medical Center, Tokyo, Japan
- 3 Artificial Organs and Medical Creations, National Hospital Organization Tokyo Medical Center, Tokyo, Japan
- 4 Radiology, St. Luke's International University, Tokyo, Japan
- 5 Radiology, National Hospital Organization Tokyo Medical Center, Tokyo, Japan

Corresponding author

Koichi Tsunoda, MD, PhD

Otoralyngology, Artificial Organs and Medical Creations, National Hospital Organization Tokyo Medical Center, National Institute of Sensory Organs, 2-5-1 Higashigaoka, Meguro-ku, Tokyo 152-8902, Japan Fax: +81-3-3411-0185 tsunodakoichi@kankakuki.go.jp

References

- Tsunoda K, Kobayashi R, Kada A et al. An oral pharyngeal scope for objective oropharyngeal examination: a new device for oropharyngeal study. Acta Otolaryngol 2018; 138: 487 – 491
- [2] DeSanto LW. Laryngocele, laryngeal mucocele, large saccules, and laryngeal saccular cysts: a developmental spectrum. Laryngoscope 1974; 84: 1291–1296
- [3] Nussenbaum B, McClay JE, Timmons CF. Laryngeal duplication cyst. Arch Otolaryngol Head Neck Surg 2002; 128: 1317 – 1320

Bibliography

DOI https://doi.org/10.1055/a-1011-4030 Published online: 27.9.2019 Endoscopy 2020; 52: E98–E99 © Georg Thieme Verlag KG Stuttgart · New York ISSN 0013-726X

ENDOSCOPY E-VIDEOS https://eref.thieme.de/e-videos



Endoscopy E-Videos is a free access online section, reporting on interesting cases and new

techniques in gastroenterological endoscopy. All papers include a high quality video and all contributions are freely accessible online.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos