Internal Jugular Vein Stenosis Secondary to Compression from an Enlarged Styloid Process: A Case Report
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Objectives:
Eagle syndrome is a rare cause of recurrent dysphagia, throat pain, and facial pain due to the elongation and enlargement of the styloid process. In a minority of these cases, the internal jugular vein may become compressed between the styloid process and the transverse process of C1, causing internal jugular vein stenosis (IJVS) and symptoms of headache, swelling, tinnitus, visual changes, and neck pain. In this report, we present the case of a patient with styloid-induced IJVS and IJV thrombosis.

Materials and Methods:
A 52 year-old female presented with intermittent right facial swelling, neck pain, otalgia, discomfort with chewing, and aural fullness. CT neck showed a markedly enlarged right styloid process partially compressing the superior right IJV against the right transverse process of C1, significantly reducing its caliber, with associated IJV thrombosis. Recommendation was for transcervical styloidectomy followed by recanalization of the right IJV by interventional radiology.

Results:
Intraoperatively, she was found to have a markedly enlarged right styloid process extending from the skull base to the hyoid in close approximation to the transverse process of C1, causing compression of the IJV. 8 cm of the styloid process was removed in total. Postoperatively, she reports improvement in her symptoms of throat pain and dysphagia, though continues to experience intermittent facial swelling. She is to undergo recanalization of her right IJV in the coming months.

Conclusions:
This report describes a rare case of internal jugular vein stenosis and thrombosis secondary to styloid process enlargement and compression of the adjacent vein.