



Suprahyoid Neck: Anatomy and Principle of Pathology

SHORT ABSTRACT

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ABSTRACT

The suprahyoid neck extends from the hyoid bone inferiorly to the skull base, excluding the orbit, sinonasal and oral cavity. The suprahyoid neck is anatomically complex but can be organized into different spaces based on the fascial planes. Multiple systems with slightly different namings are adapted. As a consensus, 5 principal spaces and 2 posterior midline spaces can be recognized. Each space contains unique contents which are subject to a predictable set of disease processes. Localization of lesions to a particular space allows the generation of a limited radiologic differential diagnosis. This is termed a “space-specific diagnosis”. The anatomy and related pathology of the pharyngeal mucosal, the parapharyngeal, the carotid space, the masticator space, the parotid space, the retropharyngeal space, and the perivertebral space will be discussed. After the presentation, participants will be able to comprehend the anatomy of the suprahyoid neck, understand the concept of a space-specific diagnosis and formulate a (differential) diagnosis when encountering pathology in the suprahyoid neck region.

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space will be discussed. After the presentation, participants will be able to comprehend the anatomy of the suprahyoid neck, understand the concept of a space-specific diagnosis and formulate a (differential) diagnosis when encountering pathology in the suprahyoid neck region.

COMPETING INTERESTS

Member of the subcommittee “head and neck radiology” in the European Society of Neuroradiology (ESNR).

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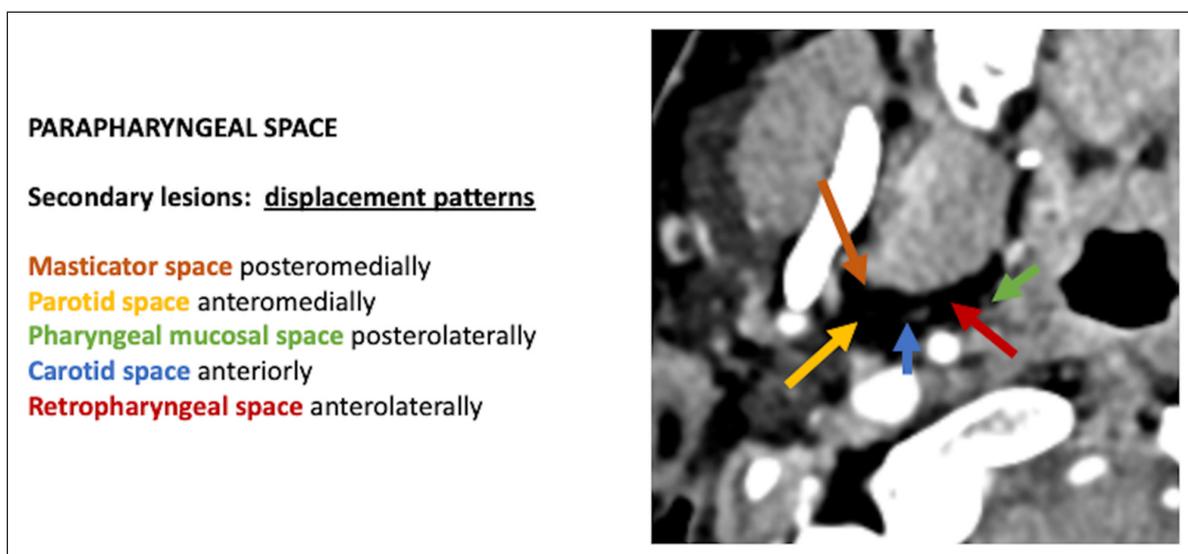


Figure 1 The secondary displacement patterns of the fat in the parapharyngeal place may help to localize pathology in the surrounding spaces and aid in the space-specific diagnosis of pathology in the suprahyoid neck.

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