

# Eagle Syndrome

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by Dr. Derek Conte

Pain and frustration seems to be the lot for people with Eagle's Syndrome. They run the gamut of doctors for help and scarcely get relief for their wide array of symptoms: sharp, "electric-shock" pain in the tonsils, tongue and back of the throat caused when speaking or eating or turning one's head, the pain often spreading to the temple, eye, ear or back of head; and the sense of "a foreign body" in the throat or tongue. Other symptoms include dry cough, vertigo, even loss of consciousness. In speaking directly to a man who had Eagle syndrome, he reported to me the following symptoms: blurry and dim vision, changes in head position causing changes in heart rate and blood pressure, altered taste (water tasting like maple syrup), facial numbness and spasticity, the ears had a popping, bubbling and full feeling with decreased hearing sensitivity, jaw popping, crawling skin, blocked nasal passages, chronic swollen glands and purulent throat infections, difficulty swallowing, insomnia, constant pain and, not surprisingly, a short temper.

Eagle syndrome is a condition where *—now stay with me here—* the **styloid process** of the temporal bone becomes elongated and the **stylo-hyoid ligament** becomes calcified. The styloid process is a sharp, spike-like bone that points downward from the underside of the skull, just behind each ear. The stylohyoid ligaments normally form a chin-strap-like suspensory connection from the points of the styloid to each side of the horseshoe-shaped hyoid bone, which is located in the throat, just above the Adam's apple, thus the term, "**stylohyoid**".

When this **stylohyoid complex** is abnormally large and rigid, it exerts pressure on three cranial nerves in the area (Glossopharyngeal, Facial and Trigeminal) potentially resulting in all of the symptoms mentioned. Misdiagnosis or mistreatment is common. Diagnosis is difficult to do by X-ray, but the prominence of the bones can be felt, usually behind and under the angle of the jaw.

Trauma is thought to be the cause, as in the way a broken foot or hand bone may heal in a tangle with adjacent bones due to overexuberant healing or loss of range of motion. But there may be another connection I see, based on other disorders also found in those with Eagle's syndrome: 64% had bone diseases where trauma, inflammation or bone growth miscues play a big role, 27% had atherosclerosis, >11% had cervical/facial trauma, and many others had autoimmune disorders (rheumatism) and infections (tuberculosis). All are inflammatory. Eagle syndrome is present in about 1 in 125 to 250 people (mostly women) the odds going up as we reach retirement age. Surgical removal of the bones is superior to anesthetics or steroids as treatments, which offer only temporary relief.

The man I spoke to had been transformed by the correction of his problem and looked years younger, finally happy and hopeful, and grateful for the years of life ahead: a true blessing.

See: **Clinic, Diagnostics and Treatment Peculiarities of Eagle's Syndrome**, By *Gervicas, Kubilius and Sabalys*; and see: **An Unusually Lengthy Styloid Process**, By *Prabhu, Nayak, Vadgaonkar, Krishnamurthy and Madhan*.

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