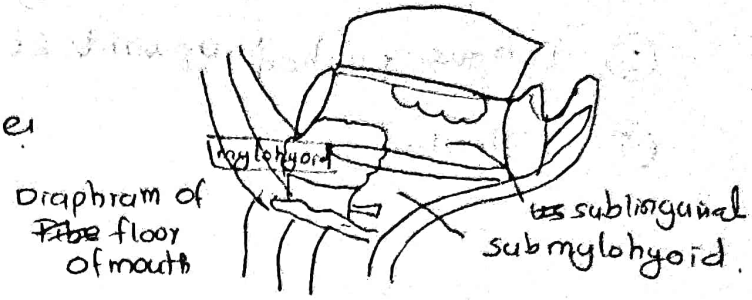
Ludwig's Angina

- infection or cellulitis of the submandibular space
- submandibular space is divided into 2 compartments by Mylohyoid muscle.



Etiology

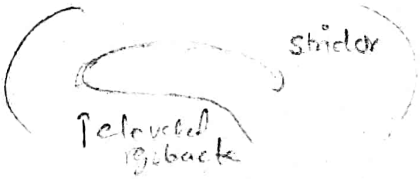
- mixed/polymicrobial infection: (both aerobes and anaerobes)
  - Hemolytic streptococci,
  - staphylococci and
  - Bacteroides

- source of infection:
  - Dental infection
  - submandibular sialadenitis
  - injuries or infection of the oral mucosa
  - Fracture of mandible

symptoms:

- Bilateral swelling of floor of mouth
- pain or tenderness in the flour of mouth
- Difficulty in swallowing
- Drooling of saliva.
- Problems with speech
- swelling and redness in the neck

11 - Airway obstruction.



Criteria For diagnosis

Goldring's criteria

1. Not an abscess - cellulitis
2. always bilateral
3. serosanguinous fluid not pus
4. spread occur via tissue spaces & not via lymphatics
5. Sparing of submandibular & sublingual gland

Examination

① Pain & tenderness in floor of mouth below the mandible

② | woody hard | consistency

③ Tongue pushed upwards & backwards

④ Stridor

clinical feature
→ difficulty in swallowing (odynophagia)
- Trismus

Management

- Systemic antibiotics
- Incision and drainage → reliere swelling

Intra oral : infection localized to sublingual space
External : infection involves submylohyoid space

Ludwing angina → No respiratory distress → secure airway.
Ludwing " → Respiratory distress → Tracheostomy

- mainly clinical diagnosis
△ → USG of neck
- CECT - D.O.C.