Canaliculus chordae tympani.

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Letters

Canaliculus Chordae Tympani

The radiographic appearance of the petrotympanic fissure, through which the chorda tympani nerve exits the tympanic cavity, is familiar to radiologists as a normal structure, not to be mistaken for a fracture of the anterior wall of the external auditory canal [1, 2]. However, the radiographic demonstration of the canaliculus chordae tympani, the bony canal which transmits the chorda tympani nerve from its facial nerve origin to where it enters the tympanic cavity, has received scant attention in the radiologic literature, with the exception of Madame Vignaud's transparencies of dissected temporal bones [3].

With multidirectional tomography in the lateral position, it is possible, as we found in 20% of patients (case shown reviewed courtesy of G. D. Potter) to delineate the canaliculus chordae tympani as a thin radiolucent line originating from the vertical part of the facial nerve canal at about the level of the floor of the external auditory canal passing anterosuperiorly to enter the tympanic cavity just lateral to the recess for the belly of the stapedius muscle (fig. 1). This is another normal landmark which should not be mistaken for a fracture line. Familiarity with the exact anatomic location of the canaliculus chordae tympani and the knowledge that it can often be demonstrated radiographically should obviate mistaking this normal structure for a fracture.

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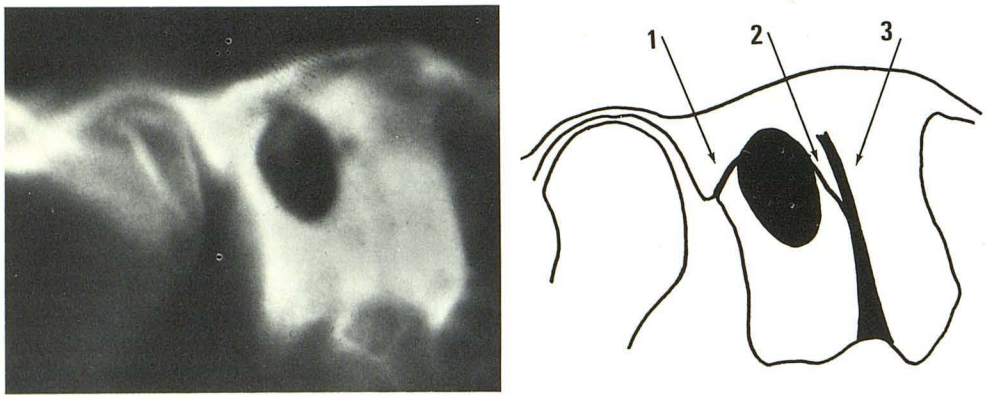

Fig. 1.—**A**, Lateral tomographic section of temporal bone. Canaliculus chordae tympani as fine radiolucent line extends anterosuperiorly from facial nerve canal. **B**, Line drawing of **A**. 1: petrotympanic fissure; 2: canaliculus chordae tympani; 3: facial nerve canal.

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