

A Case Series of Foreignbody Oesophagus and its Management at Tertiary Care Hospital

Dr. Sucharitha Arava¹
Post Graduate,
Otorhinolaryngology Department,
Govt. Medical College, Ananthapuram.

Dr. Rajesh Kumar, M.S ENT²
Associate Professor
Otorhinolaryngology Department,
Govt. Medical College, Ananthapuram

Dr. S. Sreelatha, M.S ENT³
Assistant Professor,
Otorhinolaryngology Department,
Govt. Medical College, Ananthapuram

Abstract:-

➤ Objectives:

To study the role of clinical examination as well as radiological investigations to rule out oesophageal foreign bodies as well as its plan of management.

➤ Methodology:

In total 10 patients with foreign body oesophagus came to Emergency department and ENT OPD in GGH, Anantapuram were prospectively analysed. The study period was from January 2023 to June 2023. A detailed clinical examination and radiological investigations done.

➤ Results:

There was male preponderance with children younger than 10 years compromising 50% of the patients. Upper oesophagus 80% was the favoured site for foreign body lodgement. Coins (60%), bones of chicken and meat (30%), gold chain (10%). There were no mortality or no major complications in this study group.

➤ Conclusion:

The complications due to oesophageal foreign bodies can be prevented by the early identification as well as referring the patients helps in proper management. The treatment of foreign body of oesophagus with the help of rigid esophagoscopy was an effective, safe and reliable procedure.

Keywords:- FB – Foreign Body.

I. INTRODUCTION

Ingestion of FB as well as impaction of FB in esophagus are the cause for mortality and morbidity world wide. Hence it is very important to build an appropriate approach for the ingested oesophageal FB by recognising early and treating on time in order to prevent complications. There will be significant health implications if FB oesophagus diagnosed lately. Treatment of oesophageal FB relies on a number of factors such as the site of anatomic location, FB shape and its size and impaction. Rigid esophagoscopy is the best modality for the removal of oesophageal foreign bodies.

➤ Aims & Objectives :

To study the role of clinical examination as well as radiological investigations to rule out oesophageal foreign bodies as well as its plan of management.

II. MATERIALS & METHODS

➤ Study Type: Prospective Study.

It includes the Patients with H/O foreign body oesophagus came to Emergency department and ENT OPD GGH Anantapuram.

➤ Duration: January 2023 to June 2023.

In total 10 patients were diagnosed as a case of FB in the esophagus on basis of a detailed history including physical examination and the necessary investigations. All patients with the provisional diagnosis of ingestion of FB were underwent radiological investigation (plain x-ray). All the foreign bodies were removed with Rigid esophagoscopy and patient were monitored postoperatively for complications and the relief of symptoms.

III. RESULTS

Among 10 patients there was male preponderance with children who are younger than 10 years of age and adults comprising below 50 years of age.

Table 1 Age Wise Incidence of Foreign Body

AGE	MALE	FEMALE	TOTAL
0-10 years	5	1	6
10 -20 years			
20 – 30 years	2		2
30 – 40 years	1		1
40 -50 years	1		1

The most common site of impaction of oesophageal FB was the cricopharynx followed by mid oesophagus and lower oesophagus. One foreign body was present in entire oesophagus extending into stomach

Table 2 Site of the foreign body

Site	Total no: of foreign body	Percentage
Oesophagus-cricopharynx	5	50%
Upper 1/3rd	3	30%
Middle 1/3rd	1	10%
Total length of oesophagus	1	10%

The most common foreign bodies of oesophagus were coins which is seen in 60% of cases followed by meat bones (chicken bone & mutton bone) and gold chain were the other ones.

Table 3 Types and Location of Foreign Body

Types of foreign bodies	Oesophagus	Total
Bones	3	3
Coins	6	6
Gold chain	1	1
Total	10	10

Foreign body ingestion history was present in 100 % cases. Pain in throat was the common complaint followed by discomfort / foreign body sensation dysphagia/odynophagia. Drooling of saliva mostly seen in children. Hoarseness /stridor were not encountered in the present study.

Table 4 Relevant, History, Symptoms and Signs

Definitive History	100%
Pain in throat	40%
Foreign body sensation	40%
Dysphagia/ Odynophagia	60%
Drooling of saliva	40%
Hoarseness	0%

For adults a plain x-ray lateral/AP view of soft tissue neck and for children x-ray neck to pelvis in order to rule out multiple foreign body were done. The most common radio opaque foreign body seen in the oesophagus were coins. And the coins were visible in both the antero-posterior and the lateral views of neck and chest. Meat bones and gold chain were other radio-opaque objects on x- ray.

In this way the ingestion of foreign bodies cases were confirmed radiologically. All confirmed oesophagus FBs were successfully taken out by the rigidoesophagoscope using foreign body forceps, under endotracheal intubation. with prior antibiotics and follow up done for 48 hours. There were no mortality or major complications in this study group.

➤ Radio Opaque Coins in Children Oesophagus



Fig 1 FB in Cricopharynx



Fig 2 FB in Mid Esophagus



Fig 5 Coin



Fig 3 FB in Cricopharynx



Fig 6 Coin



Fig 4 Coin



Fig 7 Chicken Bone on X ray

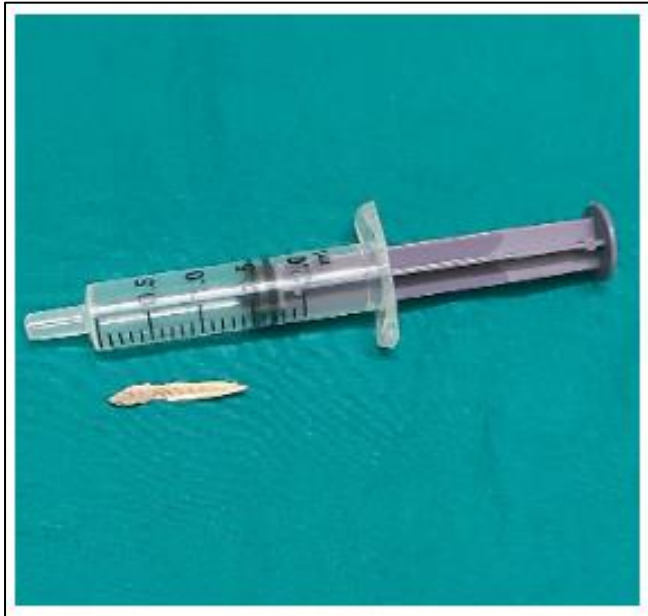


Fig 8 Chicken Bone



Fig 11 Gold Chain on x-Ray



Fig 9 Mutton Bone on x-ray

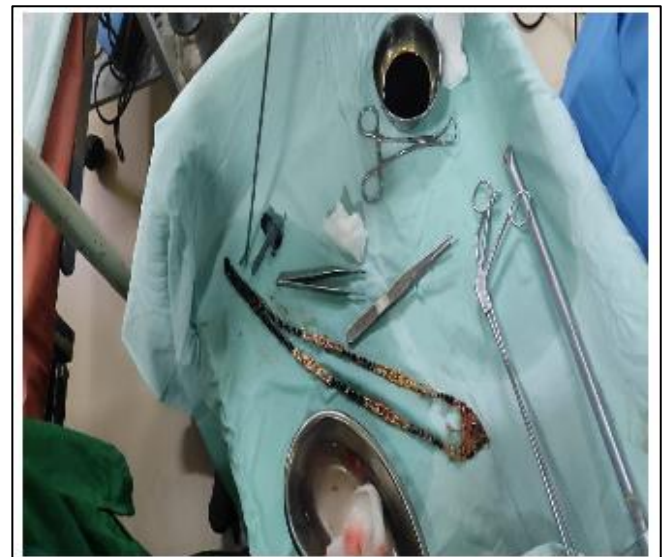


Fig 12 Gold Chain

IV. DISCUSSION

In our study age group 0-10 years were commonly affected and these observation were similar to the other studies also. Because of the inefficient mastication and with a improper deglutition and the exploratory behaviour in the form of putting objects in the mouth and different body orifices as well as shouting and frequent crying while playing make them vulnerable to affected with foreign bodies.

In the present study it shown that coins(60%) in children followed by meat bones (30%)were commonly found foreign bodies in adult.one foreign body i.e. gold chain in oesophagus was unusual presentation in adult. Cricopharynx was the most common site for impaction of foreignbody. Management of oesophageal foreignbodies were successfully done by rigid esophagoscopy.



Fig 10 Mutton Bone

V. CONCLUSION

The complications due to oesophageal foreignbodies can be prevented by the early identification as well as referring the patients helps in proper management. The treatment of foreign body of oesophagus with the help of rigid esophagoscopy was an effective ,safe and reliable procedure.

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