Foreign bodies in the gastrointestinal system that need endoscopic interventions: A single center experience from Eastern Turkey

Gastrointestinal sistemde endoskopik müdahale gerektiren yabancı cisimler: Doğu Anadolu'da tek merkez sonuçları

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TO THE EDITOR

The accidental swallowing of foreign bodies is a common presenting complaint to emergency rooms. Although 80% of cases occure in childhood, it may also occur in adults. Accidentally swallowing dentures and coins by adults have been reported (1,2), and most objects pass through the gastrointestinal tract without complication. Foreign bodies with sharp edges, such as pins or fish bones, carry a risk of complications up to 35% and require endoscopic interventions, especially those impacted in the upper gastointestinal tract (3).

Herein we report on the results of patients admitted to our emergency rooms for endoscropic intervention after accidentally swallowing foreign bodies; the study period was between January 2012 and July 2013. Twenty-five patients (28% male, 72% female) underwent endoscopic interventions. Median patients age was 28 (range, 16-75) years. The education status of patients was 40% illiterate, and 44% had graduated primary school. Median time to intervention was 24 hours (range, 2 hours-3 weeks). Underlying pathologies, which may have led to obstructi-

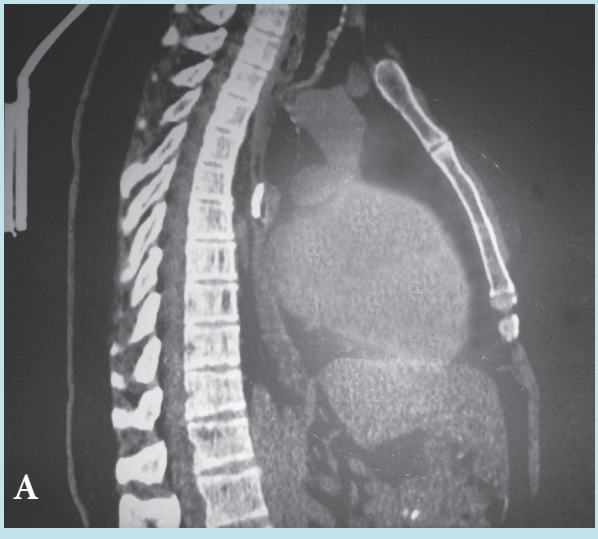

Figure A. The computed tomography image of a calf bone in the esophagus

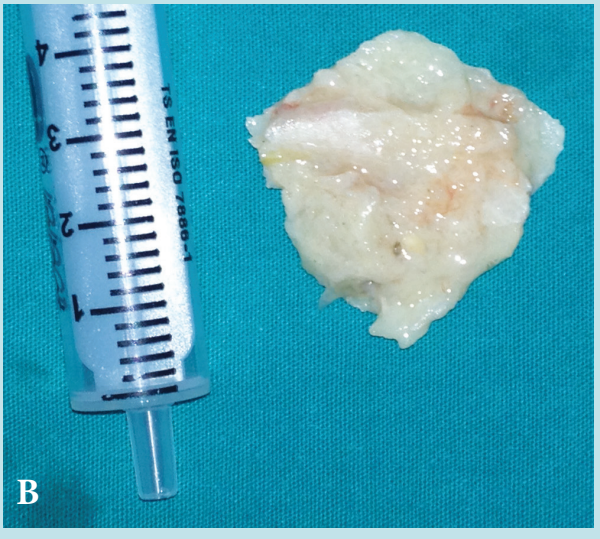

Figure B. A calf bone removed from the medial narrowing of esophagus

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on, were not seen in upper gastrointestinal endoscopies. The oldest patient was 75 years-old, and a calf bone was removed from the medial narrowing of the esophagus one week after ingestion, without complication (Figure A, B). The longest time before intervention was 3 weeks; a sewing needle stuck to the antrum wall was removed. A total of 11 calf and chicken bones, 8 pins and sewing needles, 2 plastic tooth picks, and 1 each of a fish bone, screw, coin and a slice of cucumber were removed with grasping forseps and polipectomy snare. Seventy-two percent of foreign bodies were removed from the upper- or mid- esophagus and the remaining objects were removed from the antrum. Esophageal perforations were seen in the endoscopic evaluation of two patients who swallowed calf bones with sharp edges. These patients required admittance to the emergency room, on the 4th and 5th days following ingestion. After removing the bones, the patients were treated conservatively. No complications from the endoscopic interventions occured.

Cultural and regional dietary habits may influence the spectrum of foreign bodies swallowed. In Western countries, food impactions are usually due to underlying disorders such as eosinophilic esophagitis, esophageal stricture, and Schatzki ring and require endoscopic interventions (4). In our region, calf and chicken bones are tradionally used in casseroles and are accidently swallowed. It is important to emphasize that late admission to emergency rooms, which is influenced by low socioeconomic status, may occur, thereby increasing the risk of serious complications.

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