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Upper Intestinal Gastrointestinal Bleeding from Fish Bone Foreign Body in The Pharynx: Radiological Study, Management and Removal of the Foreign Body

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1. Clinical Image

Fish Bone Foreign Body impaction in the upper aerodigestive tract is a common cause of access to emergency room [1]. One of the sites of impact is pharynx. FFB are difficult to identify on plain radiography, depending on their size, bone calcification, and the type of fish. Computed tomography (CT) is the gold standard in suspected cases of FFB, for its high sensitivity and specificity and the study of relationships with adjacent anatomical structures [2]. A 42-year-old man, presented with a 1-hour history of odynophagia and blood-stained saliva after eating fish. He tried to remove FB on his own by manipulating his fingers, but failed. He immediately came to the emergency room and was referred to the otolaryngologist. On clinical examination, vital signs were stable with a respiratory rate, heart rate, and blood pressure of 14/min, 80/min, and 120/75 mmHg, respectively. The oxygen saturation level was 98% and the temperature was 36.7ºC. On examination of the oral cavity there was red blood. We conducted an X-ray of the neck that was negative. The patient underwent a CT scan of the neck of fish bones to exclude penetration into the deeper spaces of the neck. Unenhanced saggittal CT of the neck demonstrates linear hyperdensity of about 3 cm, above the hyoid bone. Three-Dimensional Imaging Analysis with TC clarified the position of the FFB. (Figure 1, 2 and 3). The patient underwent EGD showing the pharyng wall totally penetrated by a 3 cm linear FFB that was successfully removed, haemostasis was checked. The patient underwent antibiotic prophylaxis and was hospitalized for two days. Endoscopy can be therapeutic to remove FFB. Surgical treatment occurs when endoscopy fails and consists in cervical esophagectomy and/or thoracotomy [3].

Figure 1: Saggittal CT image with hyperdense foreign body

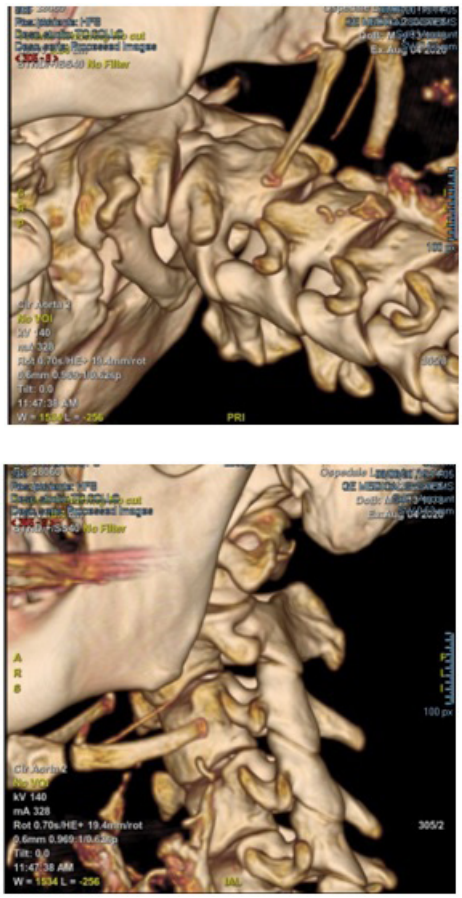

Figure 2 &3: Three-dimensional reconstruction of the position of the fishbone

2. Contributions

DG, LG, SS, VM, OT, ADC, MTC, ASS, FL and MT conceptualized and designed the study, acquired, and analyzed data, interpreted the study results, drafted the manuscript, and critically revised the final version of the manuscript.

3. Ethics Declarations

Ethics approval and consent to participate

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards.

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