

Case Report

Oesophageal Foreign Body - Banta (glass ball) A simple manoeuver for removal

M MUJEEB M M ALI W AHMED

Department of ENT, Fatima Jinnah Medical College/Sir Ganga Ram Hospital Lahore
Correspondence to Dr. M. Mubarak Ali, Senior Registrar

Impaction of foreign bodies in the digestive tract is usually at upper end of the oesophagus. Patient presents with dysphagia and excessive salivation. X-Ray Neck A.P and Lateral are essential before oesophagoscopy. We are presenting an interesting case of a child who had impacted Banta (Glass Ball) at the upper end of the oesophagus and was removed with unique maneuver.

Key Word Foreign body oesophagus -Rigid endoscopy –external manoeuvre

Foreign body in the oesophagus some time constitutes and acute surgical emergency. Impaction of foreign body in the food passage is more common in children than adults. Bone, coins, and dentures are some of the bodies commonly encountered^{1,2}. Foreign bodies in the oesophagus are usually managed according to the nature, size, shape and site of obstruction. Impaction occurs either due to size, shape of the foreign body or oesophageal narrowing due to some pathology. Rigid endoscopy is the standard technique for removal of foreign bodies from both respiratory and food passages.

Case Report

A six-year-old male presented in the emergency departments of Sir Ganga Ram Hospital Lahore in the first week of May 2001. The presenting complaint was absolute dysphagia. The parents told in the history that child swallowed a banta an hour before and since that time he is unable to swallow anything. They showed us a similar type of foreign body the patient at swallow. The banta (glass ball) of different size shape color are popular for playing in Punjab. Due to smoothens and round shape we device few method to remove it.

Under General anaesthesia patient was intubated and made proper position for Rigid Endoscopy. During the procedure we found a big rounded foreign body impacted tightly at the upper end of the oesophagus. We tried first to catch it with the forceps and dromia basket but unable to do it because its surface is very smooth. When we tried to catch it with basket but due to its large size it did not enter in it. Then we applied a special sucker at the tip of which a plastic cap was adjusted so that by negative pressure it may catch hold the foreign body due to its deep impaction it did not work. The next procedure was suggested to remove it by external approach. The patient was a young boy of 6 years old with a thin slim neck. We palpated the neck and by massage we push it upward towards the oropharynx. Luckily the foreign body was disimpacted and moved up with the movements of the fingers. In this way the foreign body was moved by simple manoeuvre.

Discussion

The ingestion of foreign bodies are not unusual due to bad habit of children to put every thing in the mouth to hide from parents. The foreign bodies are classified as living and nonliving. The non living are classified as metallic and non metallic. The nonliving foreign bodies usually classified according to shape, sharp or blunt to avoid unexpected complications. The rounded foreign bodies are usually passed through the G.I.T without any problem. In our case foreign body was big enough to pass through the G.I.T. Due to its shape and smoothness of foreign body different method was applied but they were not successful. Just before considering an external surgical approach we use our own technique to remove the foreign body and in this child was safe from major surgical procedure.

The impending complication was tracheal obstruction during manipulation. one case reported in which endotracheal tube has to pass to avoid such as complication³. In review of series 27 cases weber and jaspersen⁴. Cervical oesophagotomy was performed in one case of impacted foreign body.

Nandi, P. Ong, G.B⁵ presented is a series of 2394 cases of foreign body in the oesophagus. The most common foreign body in children was coins and fish bone. In adult fish and chicken bones were removed successfully expects in one child how had perforation. In our case of foreign body we remove it by unique technique by external massage of the neck. After review of the literature we came to know that first time foreign body was removed by this method. So it should be called as Mujeeb manoeuvre.

References

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