

Transparent Foreign Body Randomly Found in the Nasopharynx During Adenotonsillectomy

Hasan Şafakoğulları

Department of Otorhinolaryngology, Near East University Faculty of Medicine, Nicosia, Cyprus

ABSTRACT

During a preoperative examination, foreign objects may be missed due to their transparency and, as a result, these objects may obstruct the tracheal airways. This article was written to show the risk of foreign bodies escaping within the airway. As in this experience, each surgery shows that the risks involved and, in some cases, the results are unexpected.

Tonsillectomy and adenotonsillectomy operations are performed all over the world. All operations have peri-operative and post-operative complications. During an adenotonsillectomy operation I had undertaken, I came across an unexpected situation that I had not previously encountered, either through experience or in the medical literature.

Keywords: Adenotonsillectomy, foreign body nasopharynx

INTRODUCTION

Tonsillectomy and adenotonsillectomy operations are performed all over the world. All operations have perioperative and postoperative complications. During an adenotonsillectomy operation I had undertaken, I came across an unexpected situation that I had not previously encountered, either through experience or in the medical literature.

CASE PRESENTATION

A 13-year-old patient was admitted to our outpatient clinic suffering from breathing difficulties and uncomfortable nightly breathing patterns. Endoscopic examination of the patient revealed adenoid tissue sufficient to fill the choana patency and grade IV tonsil tissue according to Friedman Scala. No foreign body was seen.

An adenotonsillectomy operation was recommended to the patient's family and they accepted. Pre-operative blood tests were normal. Under general anesthesia, adenotonsillectomy was carried out in the operating room according to the procedure.

After the necessary bleeding control, saline was poured into the surgical site and the washing phase was completed. The oropharynx was aspirated first.

Afterwards, a nelaton catheter was used for nasal and nasopharynx aspiration. A drain was encountered in the transition from the right nasal cavity to the nasopharynx. Some resistance was encountered in the passage of the nasopharynx from the right nasal cavity. While the catheter was being pushed forward with a little force, a transparent leaf-shaped foreign body came into the oropharynx area (Figure 1).

This material was taken out and the required washing was completed and the operation was terminated. Post-operative follow-up was not different from other operations.

DISCUSSION

Nasopharynx is a place where the foreign bodies inserted into the nose and mouth of children can be located.¹

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ORCID iDs of the authors: H.Ş. 0000-0001-8896-4290.



Address for Correspondence: Hasan Şafakoğulları

E-mail: safakogullari@hotmail.com

ORCID ID: orcid.org/0000-0001-8896-4290

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Foreign bodies placed or inhaled into the nose can pass through the nasopharynx and settle there. These foreign bodies may mimic upper airway infections or may manifest as a mild swelling of the soft palate.¹

If an X-ray is taken, radiographs may be seen on the lateral radiographs, and foreign material that is opaque can be seen by the X-ray.

In children, foreign bodies such as buttons, beads, pea-type foods, and toy pieces, as well as rings, teeth, leeches, and fish are found.² Iatrogenic gauze forgotten in the nasopharynx has also been found.³ In addition, vomiting and coughing may also be the cause of foreign bodies being deposited in the nasopharynx.²

The standard approach in suspicious foreign body aspiration is physical examination, bronchoscopy, esophagoscopy and radiographic examination (chest radiography at inspiration and expiration and lateral neck radiography). Even if the foreign substance is removed, we should consider that a second foreign body may be present. As explained in one article, even in cases suggesting an acute aerodigestive foreign substance, a foreign substance can also be found in the nasopharynx.⁴ Nasopharynx foreign bodies can lay dormant for years without symptoms.^{5,6} The presence of foreign bodies in the nasopharynx can be determined, either as a result of the observation of nasopharyngeal obstructions following coughing attacks or by random detection.⁷⁻⁹ As foreign bodies travel to the stomach, they orient superiorly after a gag reflex thus settling in the nasopharynx.⁷ Aspiration performed without providing the necessary airway safety may result in death.¹⁰ A nasopharynx foreign body can also result in adenoid hypertrophy and obstructive sleep apnea.¹¹

In conclusion, the nasopharynx is a potential void where foreign bodies can be deposited. Even though nasopharynx examination is performed in the pre-operative evaluation, the foreign body may be overlooked as in this case. The foreign body of the nasopharynx can be determined after the examination. Therefore, the examination of the nasopharynx from both sides is important in pre-operative evaluation.

As in my case, we should keep in mind that unexpected situations may occur in every operation.



Figure 1. Foreign body identified during operation

MAIN POINTS

- This case emphasizes the importance of careful physical examination before an operation.
- In every operation, the surgeon can come across unexpected situations and complications.
- Nasopharyngeal foreign bodies can result in life-threatening conditions.

ETHICS

Informed Consent: Informed consent was taken.

Peer-review: Externally peer-reviewed.

DISCLOSURES

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