

ENDOSCOPIC REMOVAL OF AN UNUSUAL FOREIGN BODY FROM STOMACH: A WRISTWATCH

Remoção endoscópica de um corpo estranho exclusivo do estômago: um relógio de pulso

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INTRODUCTION

Foreign body ingestion is an important problem in adult with psychological disorders. In literature ingestion such as fish bone, fork and several metallic elements were reported. The first attempt, after diagnosis, is endoscopic removal¹. Surgical approach is necessary in its failure. In this paper is presented a successful endoscopic removal of a wristwatch which was ingested by a deaf patient.

A 25-year-old male deaf patient was admitted in emergency department with complaint of abdominal pain and unable to communicate anything of his clinical history. Physical examination was normal except an epigastric tenderness. Laboratory results were normal. Direct radiography revealed a circular shaped metallic object in stomach and other several metallic objects in gastrointestinal tract (Figure 1A). An emergent gastrointestinal endoscopy was planned and during the procedure a wristwatch in the stomach was diagnosed and successfully removed with an esophageal overtube approach under direct endoscopic vision (Figure 1B).

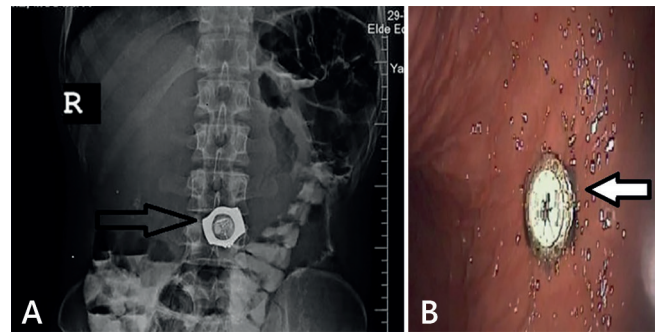


FIGURE 1 – A) Abdominal plain graph was showed a watch; B) endoscopic image of the watch in the stomach

DISCUSSION

A delay in the diagnosis and extraction of sharp or large sized foreign objects can lead to severe complications including mucosal laceration, obstruction, hemorrhage, and perforation. Therapeutic esophagogastroduodenoscopy with an esophageal overtube should be the first choice retrieval of large sized foreign bodies to avoid mucosal laceration, perforation and the surgical treatment.

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