

A Case of Esophageal Walnut Ingestion

Özofagusta Ceviz Yutulması Vakası

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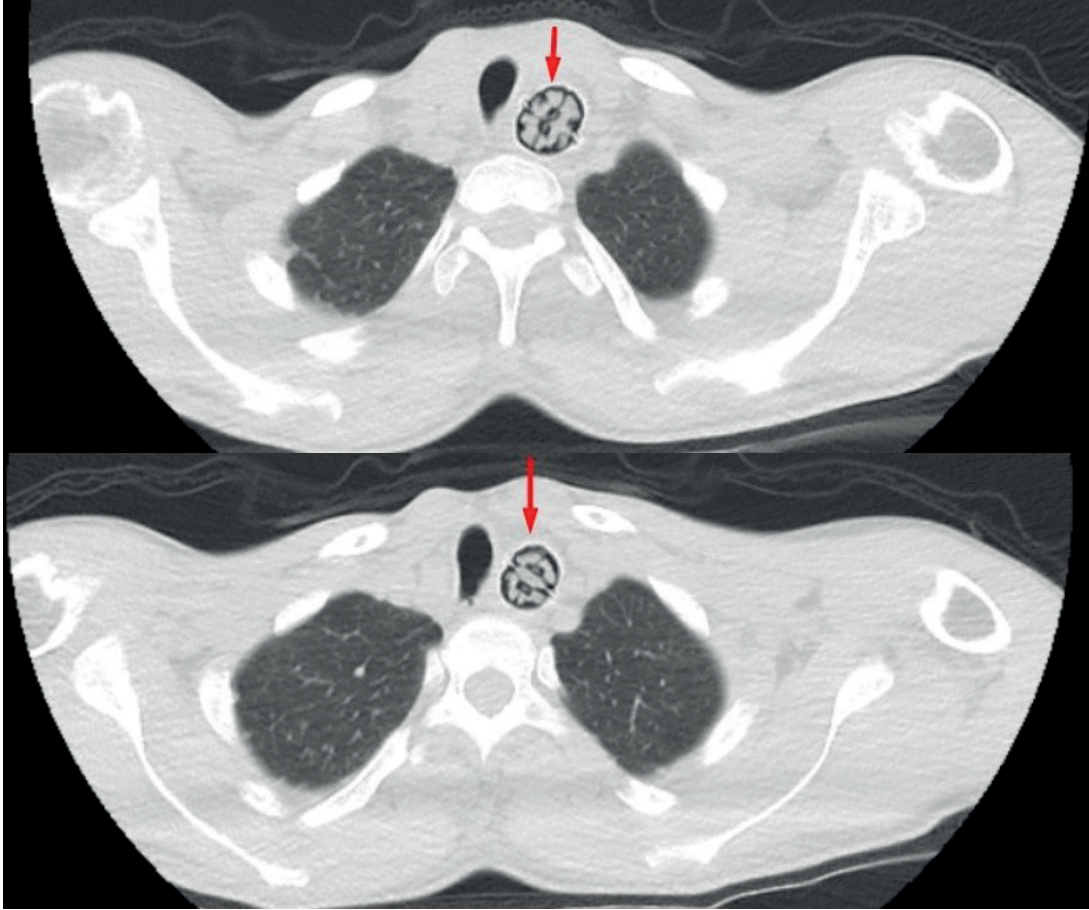


Figure 1: The cervical computed tomography of the patient (Red arrows show the foreign body within the esophagus at the level of the first thoracic vertebra)

A 32-year-old mentally retarded male patient presented to the emergency department with respiratory distress following the ingestion of a foreign body. The parents reported that they did not witness the type of foreign body ingested. The patient was conscious but non-cooperative, and disoriented, with vital signs within normal limits. A cervical computed tomography revealed a foreign body in the esophagus at the level of the first thoracic vertebra (Figure 1). An esophagoscopy was performed, revealing a whole walnut shell within the esophageal lumen. Despite the repeated use of a mesh snare and tripod during the

procedure, the foreign body could not be extracted. The procedure was continued using a rigid bronchoscope. The esophageal foreign body was successfully removed using a rigid bronchoscope, and no complications were observed after the procedure.

The esophagus, a vital component of the digestive system situated between the stomach and the mouth, is susceptible to encounters with foreign bodies, presenting various health challenges. The inadvertent ingestion of small objects often results in foreign bodies entering the esophagus, a condition that may require immediate

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intervention (1).

The entry of foreign bodies into the esophagus typically occurs due to the accidental swallowing of small objects, a phenomenon commonly observed in children. In adults, instances may be associated with ingesting food or other materials. Foreign bodies in the esophagus can result in obstruction, irritation, or even perforation, highlighting the significance of prompt and appropriate management (1,2).

The approach to foreign bodies depends on the patient's symptoms and the nature of the foreign object. Endoscopy emerges as a particularly effective method for detecting and extracting foreign bodies within the esophagus. Employing endoscopic intervention allows for a visual examination of the esophageal interior, facilitating the

safe removal of foreign bodies (2).

In such cases, swift and effective intervention is crucial in preventing potential complications. Procedures related to esophageal foreign bodies should be conducted by healthcare professionals with expertise in the field to ensure the identification of the safest and most effective treatment options for the patient.

In conclusion, timely and skillful intervention by experienced healthcare professionals is essential for managing esophageal foreign bodies effectively and minimizing the risk of complications. Swift identification and appropriate treatment options, such as endoscopic intervention, are crucial for ensuring the optimal outcome and safety of the patient.

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REFERENCES

1. Ekim H. Management of esophageal foreign bodies: A report on 26 patients and literature review. *Eastern Journal of Medicine*. March 2013;15(1):21-25.
2. Wu WT, Chiu CT, Kuo CJ, Lin CJ, Chu YY, Tsou YK, et al. Endoscopic management of suspected esophageal foreign body in adults. *Dis Esophagus*. 2011 Apr;24(3):131-7. Doi: 10.1111/j.1442-2050.2010.01116.x.