Nasopharyngeal Foreign Body in an Young Child

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Abstract A number of articles on foreign body (FB) ingestion and inhalation have been reported in the literature. Of these, reports of foreign bodies lodging in nasopharynx after inhalation/ingestion are rare. A case of FB inhalation/ingestion presented with history of respiratory distress was admitted for suspected FB bronchus and kept for observation. On examination the child was not distressed and chest examination and X-ray were normal. After 2 days, however, X-ray nasopharynx was taken for rhinorrhoea, nose block and snoring since admission. A large metal nut was found in the roof of the nasopharynx. This case is reported for its rarity, unusual presentation and misleading history.

Keywords Nasopharynx foreign body · Foreign body ingestion/inhalation · X-ray nasopharynx

Case Report

A 2 years old female Libyan child was brought to emergency department at night, with history of foreign body (FB) ingestion, “DATE” seed? 30 min before, associated with cough, choking, bluish discoloration and breathlessness. She was admitted for suspected FB bronchus. On admission there was no respiratory distress. Chest examination and X ray were normal. Next day, mother reported that, a “date” seed had come out in stools. But the child was having nose block, rhinorrhoea and severe snoring since admission, which did not improve with medicines for

2 days. An X-ray nasopharynx was taken and it showed a large foreign body—a metal nut (Fig. 1).

The case was posted under general anesthesia and the FB was removed by pushing the foreign body into the throat. Next day patient improved considerably regarding snoring and nose block. She was discharged on treatment for rhinitis. The mother later confirmed that the child had metal object ingestion and not the “date” seed. Reason for changing her history is not known.

Discussion

It was surprising, how a FB which was ingested, could lodge in the nasopharynx instead of larynx or bronchus or in the oesophagus. It is possible, that after ingestion, due to severe cough, the foreign body got expelled into nasopharynx instead of coming out of mouth. As the mother gave history of having ingested “date” seed, which subsequently came out in stools, FB in the nasopharynx was not suspected.

Review of literature revealed unusual foreign bodies like large screw with its nut [1], coin presenting as adenoid hypertrophy [2], metallic ring with chronic halitosis, gold ring embedded in soft palate for long time [3] and a case of marble impaction which had not been discovered at the time of ingestion, but detected after 4 months, with history of adenoid hypertrophy [4].

Missed foreign body in the nasopharynx is potentially dangerous, since the foreign body may descend and cause sudden airway obstruction with fatal consequences.

Therefore in all cases of vanishing foreign bodies in the aero-digestive system, it is worthy to do X-ray nasopharynx, besides a thorough nasal examination, particularly if there is co-existing nasal obstruction. In our case, the

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Fig. 1 X-ray nasopharynx (*lateral view*) soft tissue showing a large metal nut

history was misleading, chest examination and X-ray were normal. However an X-ray nasopharynx which was done for snoring and nose block surprisingly revealed a large metal nut.

Conclusion

Ingested or inhaled foreign bodies can get impacted in nasopharynx with potential serious or fatal complications.

Therefore, X-ray nasopharynx with a thorough nasal examination can save the life of a patient with history of foreign body aspiration. In other words, a patient with history of inhaled/ingested FB, where chest examination and chest X-ray are normal should have X-ray nasopharynx.

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