Autologous embedded foreign body of mobile tongue

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Abstract

Foreign bodies of upper aerodigestive tract are common otorhinolaryngological emergencies. The foreign bodies of mobile tongue are however very rare and there are only limited case reports in literature. The case of a young female with an autologous foreign body mobile tongue with unusual presentation is presented.

Keywords Foreign body · Mobile tongue · Neoplasm

Introduction

The foreign bodies of upper aerodigestive tract are well known clinical entities and all otolaryngologists have encountered them in their clinical practice. The foreign bodies are commonly lodged in the oropharynx including the tongue base and tonsils. The foreign bodies in the oral cavity involve the mobile tongue most commonly. Still the lodgment of foreign bodies in oral tongue is very rare with only the limited case reports in literature. We present a similar case of an unusual foreign body in oral tongue with an unusual clinical presentation.

Case Report

A 30-year-old female had presented to our out patient department with 6 month history of pain over tongue dorsum. She was attributing the pain to trauma to tongue dorsum after a tongue bite secondary to fall. There was history of broken incisor tooth which had gone missing. Patient did not seek any treatment and the tongue bite wound had healed. There were no other complaints except for constant pain over the area. On examination it was found that the tongue dorsum had an area of localized tenderness at the midline almost at the junction of anterior and middle third. In addition, there was palpable nodularity in the area of about 1 cm. The overlying mucosa was unremarkable (Fig. 1). On clinical suspicion, the X-Ray intraoral occlusal view was ordered. The X-ray revealed the radioopaque foreign body embedded in the area of suspicion (Fig. 2). The foreign body (tooth) was removed under local anaesthesia with no post operative sequelae.

Discussion

The foreign bodies of mobile tongue are rare but literature review reveals some interesting case reports of variety of foreign bodies in mobile tongue with varied presentations. There are reports of tooth [1], fish bone [2] and even bro-

Key message Foreign bodies embedded in mobile tongue form an important differential diagnosis in the cases presenting with atypical pain or lump and swelling of tongue.

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Fig. 1 Tongue dorsum showing normal mucosa over embedded foreign body

Fig. 2 Occlusal view X-Ray demonstrating radio-opaque foreign body (arrow)

ken plastic pipe stem pieces [3] as impacted foreign bodies in mobile tongue. Most importantly and commonly, the foreign bodies present as an enlarging mass lesion. These lesions thus form an important differential diagnosis of benign and malignant tongue masses including schwannoma, germ cell tumor, lymphoma or inflammatory lesion [3,4]. The history is frequently non contributory as it is frequently forgotten. Careful questioning however can reveal history of trauma or fish bone ingestion with persistent pain or tenderness. In cases of doubt, radiological evaluation can be useful. X-Rays are rarely helpful unless the foreign body is obviously radioopaque like in our case [5]. MRI is a good investigation in case the clinical differentiation from tumors is in doubt. The situation is further complicated by the fact that overlying mucosa is frequently intact. Incisional biopsy can be done for histopathological differentiation from tumors. Foreign bodies can be frequently visualized and removed during biopsy. Histopathology reveals the characteristic foreign body granuloma.

Treatment is usually simple excision under local anaesthesia after the more sinister causes are confidently ruled out.

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