



Intentional foreign body ingestion

Ranesh Kumar¹ · Nikhil Soni¹ · Suraj Bhardwaj¹ · Rohit Bhoil²  · Suresh C. Gupta¹

Received: 2 July 2019 / Accepted: 22 August 2019 / Published online: 10 September 2019
© Società Italiana di Medicina Interna (SIMI) 2019

A 35-year-old male with history of personality disorder and substance abuse was brought to the emergency department by his spouse with complaint of some sharp object protruding out of his abdomen in the epigastric region (Fig. 1a). Patient was hemodynamically stable at the time of presentation and gave history of painful epigastric swelling since 5 days which ruptured accompanied with slight bleeding 3–4 h back. Abdominal X-ray showed multiple radio-dense foreign bodies of different shapes (Fig. 1b). No free air under diaphragm was seen. Both patient and his wife denied history of foreign body ingestion. Past history was not significant. Emergent exploratory laparotomy revealed perforation of stomach by a sharp metallic blade of knife, ingested by the patient (Fig. 1c). Multiple foreign bodies (including spoons, screw drivers, toothbrushes, a knife, and a nail) were extracted by anterior gastrotomy (Fig. 1d). The patient was later referred to the psychiatric department for his mental illness.

Foreign body ingestion is a common condition seen in the emergency department. It may be accidental which accounts for approximately 80% of all cases of foreign body ingestion (encountered mostly in children less than 3 years) or intentional (seen primarily in adults with psychiatric disorders, substance abuse, or in patients with external motivational factors, e.g., in prisoners) [1–3]. Intentional foreign body ingestion often has a recurrent occurrence as a method of inflicting self-harm or as a part of attention seeking behaviour. About 80–90% of ingested foreign bodies spontaneously pass through gut, 20% require endoscopic removal and about 1% need surgery, indicated for complications of perforation (as seen in the present case), severe haemorrhage, persistent/complete bowel obstruction, or for removal of toxic material(s) [3, 4]. Such patients should have an early psychiatric referral for establishing a diagnosis to prevent/minimise harm to the patient and to prevent future occurrences [5].

✉ Rohit Bhoil
rohitbhoil@gmail.com

¹ Department of Surgery, SLBS Medical College, Mandi, HP, India

² Department of Radiodiagnosis, SLBS Medical College, Mandi, HP, India



Fig. 1 **a** A 35-year-old male presented in emergency with complaint of some sharp object protruding out of his abdomen in the epigastric region. **b** X-ray abdomen revealing multiple radio-dense foreign bodies of different shapes. **c** Emergent exploratory laprotomy revealed

perforation of stomach by a sharp metallic blade of knife, ingested by the patient. **d** Multiple foreign bodies (eight spoons, two screw drivers, two toothbrushes, a knife, and a nail) which were extracted by anterior gastrotomy

Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

Statement of human and animal rights All procedures performed in studies involving human participants were in accordance with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed consent Written informed consent was obtained from the patient's wife for being included in the study.

References

1. Atluri D, Veluru C, Chopra A, Mullen KD (2012) Recurrent intentional foreign body ingestion: an endoscopist's dilemma. *Gastroenterol Hepatol (N Y)* 8:482–484
2. Ambe P, Weber SA, Schauer M, Knoefel WT (2012) Swallowed foreign bodies in adults. *Dtsch Arztebl Int* 109:869–875
3. Eisen GM, Baron TH, Dominitz JA, Faigel DO et al (2002) Guideline for the management of ingested foreign bodies. *Gastrointest Endosc* 55:802–806
4. Ougrin D, Tranah T, Leigh E, Taylor L, Asarnow JR (2012) Practitioner review: self-harm in adolescents. *J Child Psychol Psychiatry* 53:337–350

5. Palese C, Al-Kawas FH (2012) Repeat intentional foreign body ingestion: the importance of a multidisciplinary approach. *Gastroenterol Hepatol (N Y)* 8:485–486

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.