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BEING MINDFUL OF THE CONTEXT



To the Editor:

I want to thank Dr. Cappelletti and colleagues for showing interest in our article and for their insightful comments (1). They have put forward three interesting points, namely: 1) Differentiation of the term body packing from other terms like body pushing; 2) Use of items other than illegal drugs in body packing; 3) Self-presentation by the body packers to a health care facility.

Our case described essentially a body packer, so the term body pushing was not mentioned or described in the article. We have defined body packing as “deliberate storing of contraband.” The word contraband is defined by Merriam-Webster as “goods or merchandise whose importation, exportation or possession is forbidden.” Even if some substances like opioids may be “legal” otherwise, they may not be legal in circumstances in which they are carried in large numbers or without a

proper license or certificate; hence, the need for them to be concealed or “body packed.” Finally, the body packers presenting by themselves are indeed reported in the literature, but are likely to be lesser in number as compared with the symptomatic ones or the ones apprehended by a law enforcement agency. In any case, the radiological features and management are essentially the same. They, as compared with the other groups, would likely be more compliant with the treatment prescribed (2).

Although all the points thus mentioned are valid on their own, it would be important to finally revisit the context with respect to our article. Our article was published in the “Visual Diagnosis in Emergency Medicine” section and essentially highlighted (within the stipulated word limit) the radiological images and the extraordinary laparotomic view, pertaining to a case of body packing. The article was not intended to be a one-stop elaborate review—the likes of which are available in the literature and have also been quoted extensively by Cappelletti et al in their letter.

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