

原文題目(出處)：	Endoscopic removal of an unusual foreign body in the nasopharynx of an adult
原文作者姓名：	Gautam Bir Singh, MSa,4, Sandeep K. Jha, MBBSa, Ruchir Dhawan, MBBSa, Amit N. Dwivedi, MBBSb, Mayank Yadavc
通訊作者學校：	Banaras Hindu University, Varansi, Uttar Pradesh, India
報告者姓名(組別)：	實習E組黃華卿
報告日期：	970922

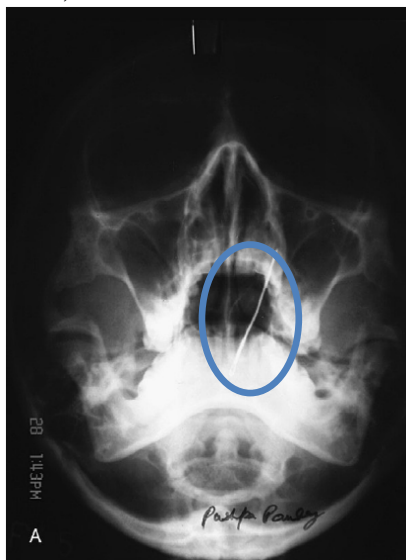
內文：

Abstract:

This is a case report of sewing needle impaction in the nasopharynx. Foreign bodies are rare in nasopharynx, in this case the cause was the action of sneezing, and the needle was removed using endoscope. This is a previous unreported case, and the overall mechanism for the impaction was felt to be interesting.

Case report:

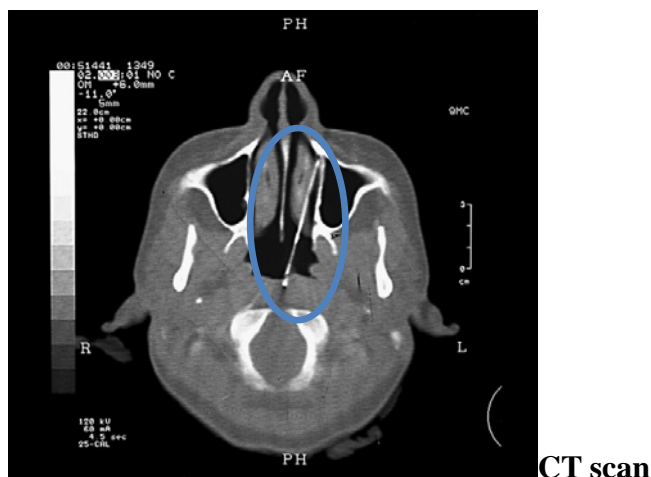
- ✧ Age:32
- ✧ Gender: female
- ✧ Past medical history:
Accidental unhalation of a sewing needle 20 days earlier, after sneezing while cleaning her teeth with the needle. Patient complains about dull pain in the region of the nose and a degree of anxiety.
- ✧ Previous treatment:
Locate the FB in nasopharynx, but unable to retrieve it. Unremarkable eyes, nose, throat examination



Water's view



nasopharynx lateral view



CT scan

- ✧ Tools to locate the FB:
 1. **anterior rhinoscopy**: nothing
 2. **posterior rhinoscopy**: needle-like object traversing the nasopharyngeal space obliquely from the left posterior choana
 3. X-ray PNS **waters view** & nasopharynx **lateral view**
 5. **nasal endoscope**: a part of the needle lying impacted in the posterior wall of the nasopharynx, the rest of the the FB was embedded in the mucosa of the nasal cavity.
 6. **computed tomography**: FB lying obliquely with it's anterior end jammed just below the inferior turbinate in the left nasal cavity, and the posterior end impacted in the posterior wall of adjoining part of nasopharynx.
- ✧ Surgery procedure:

Using **Blakesley-Weil forceps** under local anesthesia with **0⁰/4mm Karl Storz endoscope**, the FB was grasped firmly as close as possible to it's embedded end, dislodged and pushed anteriorly. With this act the pointed end of the needle protruding out of the mucosa below the inferior turbinate, and using an **artery forceps** grasped it's anterior end, removed from the front. The needle was taken out in one piece, and the result trauma was only a light bruise in the posterior wall of nasopharynx. Patient was prescribed with antibiotics and analgesics, and was discharged within 6 hrs after the surgery.
- ✧ Post operative follow up:

Uneventful, no complication was recorded.
10 days later a repeat nasal endoscopy was performed and no clinically significant abnormality was detected.

Discussion:

1. the uncommon retained FB in the nasopharynx of adults was usually discussed because of it's nature as trauma or the invasive surgical intervention for the retrieval of the FB. Ether aspect shows the uniqueness of this case.
2. The mode of impaction in a way indicates the process of sneezing. Sneezing, or sternutation, is a reflex caused by foreign particle irritating the nasal mucosa., which is initiated by the irritation of the Vth nerve and it trigger in medullas. It has two component: the air is first rapidly inspired, and then forcibly expelled out through the nasal passages. The first action caused the needle to be ingested through the mouth, and the second action, which was supposed to push the foreign body out of the nasal cavity, unfortunately due to the gravity exerted to the needle, resulted in the impaction of the needle in the nasal mucosa. It's impaction is

head-down , therefore the anterior part is embedded in the floor of nasal mucosa, which is undetectable by anterior rhinoscopy. This kind of impaction in the nasopharynx has a potential fatal consequence once it dislodged.

3. The region of nasopharynx is easily omitted in the x-ray taking. It is easily missed diagnosed as in this case.
4. Whether dental cleaning with needle initiated the reflex is debatable. However the usage of pointed object inside mouth by oneself should be avoided in case of any kind of accidentally impaction.
5. Nasal endoscopic surgery for removal of FB is indicated here as little time consuming and minimally invasive. It's worth trying for any kind of sharp and liner FB in the nasopharynx.

題號	題目
1	<p>What is the most unlikely damage that the foreign bodies in the nasopharynx may cause?</p> <p>(A) Damage the maxillary division of the Vth cranial nerve (B) No damage at all (C) Numbness of the lips (D) Psychological stress</p>
答案 (C)	<p>出處： Netter's head and neck anatomy for dentistry p.408 p.436-438</p>
題號	題目
2	<p>What is the most unlikely site that a foreign body in the oral cavity might end up After sneezing ?</p> <p>(A) Frontal sinus (B) Sphenoidal sinus (C) Capsule of temporomanbibular joint (D) Opening near auditory tube</p>
答(C)	<p>出處：Netter's head and neck anatomy for dentistry p.321.322</p>