METALLIC RING IN THE NASOPHARYNX OF A CHILD SIMULATING SINUSITIS: A CASE REPORT

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ABSTRACT

Foreign body in nasopharynx, although rare, is an emergency condition as it may trickle down into the airway and cause sudden upper airway obstruction. They produce minimal signs and symptoms and thus are difficult to diagnose. Here, we report a case of a metallic ring impacted in the nasopharynx of a 6 year old child which presented with signs and symptoms of sinusitis unresponsive to treatment. X-rays showed a radio-opaque ring in the nasopharynx. Immediate removal of foreign body in the nasopharynx was performed under general anesthesia. In all cases of missing foreign bodies in the aerodigestive system, nasopharyngeal impaction should be kept in mind and imaging done with endoscopic examination.

Key words: Nasopharynx, oropharynx, sinusitis, aerodigestive system

INTRODUCTION

Foreign body ingestion is quite common and has a wide and variable spectrum of clinical presentation. Nasopharyngeal foreign bodies however are relatively rare. They commonly result from the object being pushed through the anterior nares or posteriorly after vomiting or forceful coughing of an ingested or aspirated foreign body. Also in an attempt to remove a foreign body from a child’s mouth it may be inadvertently pushed into the nasopharynx1. Other means are through palatal defects and penetrating trauma2 3. Normally nasopharyngeal foreign bodies produce minimal symptoms and signs thus a high index of suspicion is needed to diagnose them.

CASE REPORT

A 6 year old girl was brought to the Ear, Nose and Throat (ENT) Unit of a secondary health care and referral centre in Ghana with a 4 month history of recurrent offensive right nasal discharge with nasal blockage, headache and right cheek swelling which had
been treated at a health centre on 6 occasions without noticeable improvement. At the time of presentation, the significant findings were a thick greenish fluid in the right nostril with hypertrophy of the turbinates, moderate edema of the right cheek and hyperemia of the oropharynx with a post-nasal drip. An initial impression of Chronic Sinusitis with Right Facial Cellulitis was made and treatment started. X-rays of the sinuses and the postnasal space revealed a ring-like radio-opaque object in the nasopharynx.

Figure 1. X-Ray Sinuses showing ring-like object in the region of the right half of the nasopharynx.
Examination of the nasopharynx under general anaesthesia was then done. Patient was placed in the supine position with head extended. A soft rubber catheter was passed through each nostril and other end of the catheter was pulled out from the oropharynx in order to give traction to lift the soft palate. A rusted incomplete metallic ring was found embedded in the nasopharynx. The ring was then removed with a curved artery forceps. There was minimal bleeding from the site.
DISCUSSION

The anatomical location of nasopharynx and the nasopharyngeal isthmus prevent upward movement of a foreign body after ingestion. For this reason, foreign bodies in nasopharynx are exceedingly rare. However, forceful emesis, digital palpation of foreign body in the mouth, or a penetrating trauma may cause foreign body to get lodged in nasopharynx. What makes the diagnosis of nasopharyngeal foreign bodies difficult is the absence of symptoms at the time of the ingestion of the object. Most parents forget about such situations since they are uneventful. Cases have been reported where foreign bodies remained undetected for quite a long period. Such presentation is particularly dangerous as these foreign bodies may move down and cause acute respiratory obstruction. Thus, every attempt must be made to rule out foreign body impaction in the nasopharynx in cases of foreign body aspiration or ingestion especially in cases of untraceable foreign bodies.

Nasopharyngeal foreign body should be removed under general anesthesia with the airway secured by an endotracheal tube. Having the procedure performed in a sedated child is contraindicated since the airway is unprotected. Successful removal of a foreign body requires visualization and proper instrumentation. Nasal endoscopes help in identification of the foreign body and its removal via nasal route.

CONSENT

Written informed consent was obtained from the patient for publication of this case report and any accompanying images.
COMPETING INTERESTS

The authors declare that they have no competing interests.

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REFERENCES