

Vomiting Puzzle Uncovering Paediatric Foreign Body Ingestion

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No 276

Introduction:

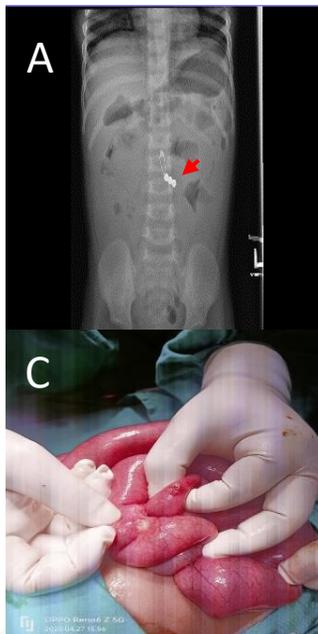
Foreign body aspiration is a common occurrence in the paediatric population, particularly in children under 3 years old. Most cases of foreign body ingestion are low-risk objects and can be managed without imaging or surgical intervention. However, sharp object ingestion may require immediate removal to avoid serious complications including perforation or death.

Case description:

We reported a case of a 1-year and 3-month-old child who presented to the ED with a complaint of recurrent vomiting of more than 15 episodes with a low-grade fever for one day. The vomiting was described as forceful, non-bilious, and non-projectile. There was no diarrhoea, abdominal distension, or recent head trauma. Clinically, the child was hemodynamically stable with a soft abdomen. He was initially admitted with an impression of acute gastroenteritis with poor oral intake.

During admission, he developed recurrent episodes of intractable vomiting; thus, an abdominal radiograph was requested to look for possible acute surgical conditions such as intestinal obstruction. Abdominal radiograph (figure A, B) identified safety pins and rounded opaque structures (arrow) projected over the upper part of the abdomen in keeping with foreign bodies. Ultrasound abdomen revealed signs of bowel perforation.

He underwent exploratory laparotomy, which intraoperatively revealed three perforations over the small intestine (Figure C, D). Postoperatively, the child's condition improved with the resolution of symptoms.



Discussion:

This case highlights the importance of frequent assessment in cases of suspicion or uncertainty. Recognising foreign body ingestion in children can be challenging without a proper history and eyewitness. Although most foreign bodies can pass spontaneously without intervention, potential complications such as bowel perforation should not be ignored, especially in sharp object ingestions.

Conclusion:

Physicians should maintain a high index of suspicion of foreign body ingestion in a child with non-specific gastrointestinal symptoms and prompt for radiological surveillance.

References:

- Bolton SM et Al. Button battery and magnet ingestions in the pediatric patient. *Curr Opin Pediatr.* 2018 Oct;30(5):653-659
- Saw-Aung M et Al National Trends of Pediatric Aspirated/Ingested Foreign Bodies. *Clin Pediatr (Phila).* 2024 May;63(4):531-540