



OMENTAL MASS SECONDARY TO MIGRATION OF INGESTED FISHBONE

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ABSTRACT Foreign body ingestion cases are routinely seen in the emergency departments. Most of the ingested foreign bodies pass through GIT uneventfully within a week, however symptoms may arise due to occasional obstruction or perforation. Sometimes foreign body migrates asymptotically into the abdominal cavity by eroding through bowel wall without causing leakage of bowel contents. We report a case of inflammatory omental mass due to perforation of ileum by the fish bone.

KEYWORDS :**1. INTRODUCTION**

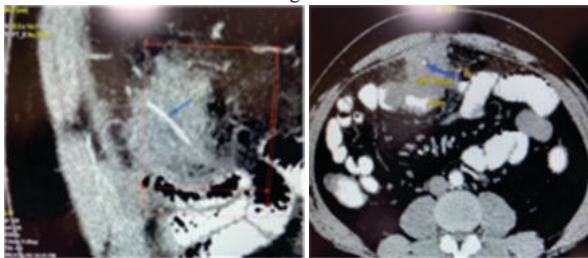
Foreign body ingestion cases are routinely seen in the emergency departments. Most of the foreign body ingestions are accidental. Most of the ingested foreign bodies pass through GIT uneventfully within a week, however symptoms may arise due to occasional obstruction or perforation.¹

Perforation of GIT due to sharp foreign bodies occurs in less than 1% and can be dangerous.² Sometimes foreign body migrates asymptotically into the abdominal cavity by eroding through bowel wall without causing leakage of bowel contents.^{3,4} We report a case of inflammatory omental mass due to perforation of ileum by the fish bone.

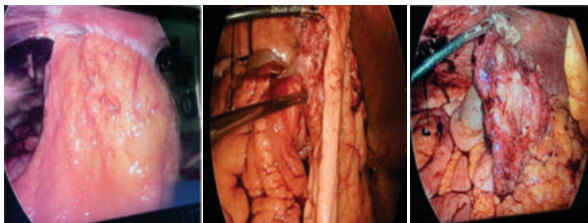
2. Case Report

A 48 year man, electrician by occupation presented with a gradual onset, colicky pain in the RIF and Umbilical region for 1 week, Associated with low grade fever since 1 day. On examination patient's vitals were normal. Tenderness in RIF and severe focal tenderness present at the umbilicus.

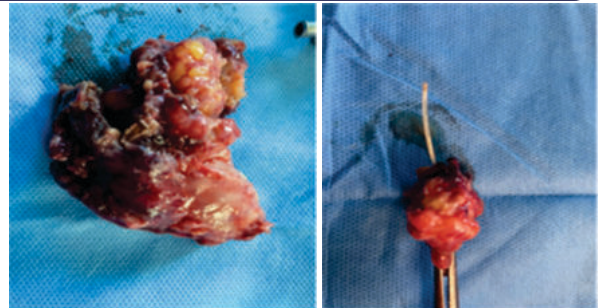
- Routine investigations were within normal limit.
- Ultrasound abdomen showed features of acute appendicitis.
- CECT abdomen and pelvis was done which showed dense ?metallic fb with surrounding inflammatory soft tissue and associated ileal wall thickening



Patient was taken up for diagnostic laparoscopy which revealed a mass constituted by ileum and omentum seen attached to anterior abdominal wall. Omental mass was separated from the ileum, serosal integrity checked and was normal. Omental mass dissected and extracted.



- On examining the extracted specimen, object similar to fish bone was identified.
- Histopathological examination of omental mass showed- acute inflammatory pathology

**DISCUSSION**

- Perforation by ingested foreign bodies is uncommon and less than 1%. The ileum is the most common site of perforation. Clinical presentations vary. Bowel perforation by foreign bodies can mimic acute appendicitis.
- Clinically, patients often do not recall ingesting the foreign body, hence correct diagnosis is frequently delayed.
- Investigations, such as USG, CTs, may lead to the correct diagnosis. In recent years, laparoscopy has been increasingly recognized as a procedure offering precise, visual assessment & allowing consequent prompt intervention. (5)

CONCLUSION

- Perforation of intestinal structures by fish bone is a challenging diagnosis that should be recalled in cases of acute abdominal symptoms.
- Appropriate imagery techniques and a complete interrogatory will lead to the correct diagnosis. Delay in diagnosis and treatment can be associated with significant morbidity and mortality.

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