



A CASE REPORT OF LIVER ABSCESS CAUSED BY INGESTION OF FISH BONE

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KEYWORDS :

INTRODUCTION

- Foreign bodies in the digestive tract are a common emergent situation in clinical practice that are generally caused by the mistaken consumption of diverse types of foreign bodies, such as chicken bones, fish-bones, toothpicks, and coins.
- Under normal circumstances, foreign bodies can be smoothly eliminated from the digestive tracts without any mal-adaptation. Only a very small amount of foreign bodies can be retained in the digestive tract and can lead to complications.
- Secondary liver abscess caused by the transfixion of foreign bodies through stomach walls is seen more rarely. A case of liver abscess induced by the formation of a sinus after a foreign body penetrated the stomach wall was reported in this case study, foreign bodies in the upper digestive tract should be treated as soon as possible by taking proper measures to prevent serious complications occurring such as peptic ulcer perforation, bleeding, obstruction, and septic shock.

Case Report

A 42 years old male patient presented to the surgery opd with chief complaints of severe pain abdomen since last 15 days with on and off fever episodes associated with chills, vomiting, the symptoms subsided after 5 days of infusion treatment at local clinic, two days later recurrence of symptoms occurred. The per abdomen examination revealed the abdomen was soft, no tenderness or rebound tenderness or any other mass palpable per abdomen, the laboratory examinations showed leucocytosis and raised ESR and CRP levels, The USG abdomen revealed a mix mass in left hepatic lobe, CT Abdomen showed a circular low density foci in left hepatic lobe probably a liver abscess, A dense foci was found in proximity to left hepatic lobe, implying retention of a catheter in upper abdominal cavity or presence of a foreign body or strip of intra abdominal calcification. After a thorough preoperative preparations under general anesthesia Exploratory laprotomy was performed it was found that the tissues around the left hepatic lobe and the stomach were tightly adhered and a giant abscess with fibrotic surface was seen, After carefully separating the intestinal adhesion in the enterocoelia and around the left liver the left hepatic lobe was resected followed by hemostasis of the wound, After pulling the stomach downward and the organised abscess in the lesser curvature side was separated. This revealed a liver abscess caused by transfixion of a fish bone through the stomach wall that had stabbed into the liver, The fish bone was then separated and removed, abscess drained and ruptured stomach wall closed and abdomen was closed in layers, The patient was discharged after a week and is in good condition with regular follow up of 3 months after operation

DISCUSSION

Bacterial liver abscesses are common clinical infectious disease of the liver and mainly present as fever, chill, and stomachache. In comparison, the liver abscess that resulted from the penetration of foreign bodies through the stomach wall after entering the digestive tracts is rarely seen in the clinical practice. the complications caused by foreign bodies in the digestive tract should be comprehensively assessed according to the medical history of the patient and based on laboratory examination and imaging manifestation. The patient in this case did not describe definite ingestion of foreign bodies at questioning which was probably because the fish had been ingested a long time prior to complication. The contrast-enhanced CT of the abdomen provides favorable assistance to the finding of foreign bodies in digestive tracts. It can help to diagnose the liver abscess but can also guide the selection of the therapeutic regimen. In the treatment, it was suggested to use antibiotics to control the infection at first. At the same time, drainage of the abscess is generally needed, and the infection could not be completely treated before removing the fish bone. Meanwhile, this case study is expected to attract the attention of people who eat fish and those who mistakenly eat fish bones should seek medical treatment as soon as possible.

INTRA-OP

