ORIGINAL RESEARCH PAPER
Volume - 11 | Issue - 05 | May - 2022 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

INCIDENTAL FINDING OF A CHARM NEEDLE ON INTRA ORAL PERIAPICAL RADIOGRAPHS

Oral Medicine & Radiology

Suyambukesan Subashini*
MDS MFDS RCPS (Glasg) FADI Assoc Prof and Head, Oral Diagnostic and Surgical Sciences, Faculty of Dentistry, Lincoln University College, Selangor, Malaysia. *Corresponding Author

Perumal Gopu Chandran Lenin
MDS MFDS RCPS (Glasg) FADI, Assoc Prof, Department of Periodontology, Faculty of Dentistry, Lincoln University College, Selangor, Malaysia.

ABSTRACT

The insertion of 'susuk' or charm needles is a common superstitious practice in South East Asia. Susuk is mostly made up of gold and is inserted subcutaneously in different parts of the body. There will be no complaints from the patient with regards to susuk and the patient will not mention about its placement, but it can be seen as an incidental finding on radiographs.

KEYWORDS

charm needles, susuk, radiographs.

INTRODUCTION:

The superstitious belief of humans encompass a broad range from a simple daily routine to various adverse or unique unacceptable activities. The practice of insertion of susuk or charm needles is one such practice commonly followed in South East Asia. This metallic talisman, commonly made up of noble metals is subcutaneously inserted into any parts of the body. Those people on whom it is inserted believe that susuks enhance their esthetic appearance and can also cure various ailments. Susuks are most commonly inserted into the orofacial region.

Radiology is a medical specialty that employs the use of imaging to diagnose and treat diseases visualized within the body. Radiographs provide vital information for dental treatments. Susuks which cannot be noticed clinically or palapated on the orofacial region can be clearly appreciated on routine periapical radiographs. So dentists can commonly encounter the presence of such structures on radiographs.

CASE REPORT:

A 42 year old Malay female patient reported with a complaint of severe pain in the upper right last tooth for the past one week and she requested for extraction of the tooth. Her medical, surgical and pat dental history were noncontributory. Complete clinical examination was done and a diagnosis of dental caries with symptomatic periapical periodontitis was made. An intraoral periapical radiograph of the upper right third molar was taken (Figure 1) with bisecting angle technique to aid in treatment. The radiograph was processed manually. The radiographic findings for the complaint tooth was mesiocervical decay involving pulp. In addition, in relation to the first molar, alveolar bone loss was observed. Also, a peculiar finding of presence of a radiopaque needle like structure of linear dimension 4mm in relation to the crown of first molar was noted. The linear structure had a sharp end towards the occlusal plane and a blunt end. To confirm its presence, another radiograph with a horizontal shift was taken (figure 2). A radiographic diagnosis of 'susuk' was made for that radiopaque structure. There was no external scar marks and the region was not tender on palpation.

However, the patient denied placing any charm needles in the region. She also avoided further questions regarding susuk and did not want any treatments to be done. The sudden change in the attitude and behavior of the patient was quite appreciable.

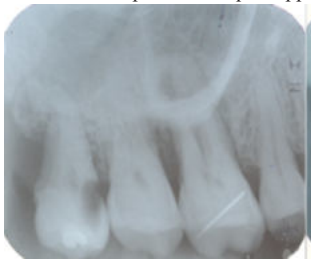

Figure 1 - IOPA Depicting Susuk

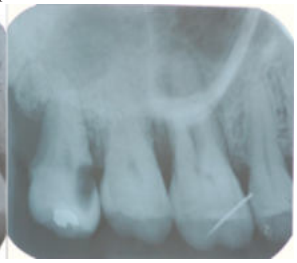

Figure 2- IOPA Taken With Horizontal Shift

DISCUSSION:

'Susuk' is defined as charm needles, a form of talisman inserted subcutaneously in the face or other parts of the body.[1] It is hypothetically assumed by the wearers to boost their attractiveness, youth and charisma. Some wear to advance their career or business, while some believe that these needles can relieve head ache and joint pains too[2]. These people trust that susuks deliver these things to the wearer by casting a spell [3].

This belief is commonly practiced in South East Asian countries like Malaysia, Singapore, Brunei, Thailand and Indonesia. It is inserted by a 'bomoh' or Malay Shaman , a native Malay medicine man who provides spiritual healing and divination[1].It is inserted without regional anaesthesia. Some patients may not feel pain during insertion, indicating a possible psychological alteration by hypnotism.

Susuk is in the shape of a pin or needle measuring about 0.5 mm in diameter and 0.5 -1.0 cm in length. The materials used are biocompatible and do not cause any harm to the wearers. These susuks does not contain any ferro magnetic materials and therefore pose no hazards to patients undergoing MRI. Gold is commonly used to make susuks followed by silver and copper. The analysis of the chemical composition revealed that it contains about 89.75 % of gold and 10.25 % of copper [5].

The number of needles inserted varies among different patients. Nor MM et al [6] reported a case of 80 needles inserted in the face of a single patient. The most common sites for susuk placement are chin, cheeks and eyebrows. The patients will never disclose any information regarding susuks for fear about the belief that the very purpose of susuk insertion will not be achieved. In our case too, the patient refused to deliver any details regarding her susuk. This is in concordance with other studies [1,4].

There is no reported incidence of infection associated with susuk, although the following points have to be considered. Susuk is a foreign body, but no inflammation is observed in the area of interest. The method of insertion has to be reviewed. The needles would not be sterilized as they are not inserted by a qualified medical practitioner. Teo LL [7] reported a case of misdiagnosis of an embolised needle fragment in the heart of an intravenous drug abuser as a case of subcutaneous charm needle. Further research is warranted by the health care providers to get inputs from the patients and from the persons who insert these talismans in the patients without any guidelines.

CONCLUSION:

Medical and dental professionals must note that the practice of susuk is common in South East Asia, it can be detected and diagnosed easily on radiographs ,intraoral radiographs at different horizontal angulations helps us to make a definitive diagnosis and most importantly patients will never let away any information regarding their susuk. An understanding of this practice and an awareness of their existence is imperative to avoid misdiagnosis and unnecessary treatment of this condition.

REFERENCES:

1. Shanmuhasuntharam P, Ghani SH. Susuks: charm needles in facial soft tissues. Br Dent J 1991; 20: 309–311.
2. Soo YS, Singh J. Some radiological observations on the practice of insertion of "charm needles". Med J Malays 1972; 27: 40–42.
3. Teo SK. A woman with hidden charm needles. J R Coll Physicians Edinb 2006;36(3):211-2.
4. Loh FC, Yeo JF. Talisman in the oro-facial region.Oral Surg Oral Med Oral Pathol 1989; 68: 252–255.
5. Loh FC, Ling SY. Analysis of the metallic composition of orofacial talismans. Oral Surg Oral Med Oral Pathol 1992;73(3):281-3.
6. Nor MM, Yushar A, Razali M, Rahman RA, Ramli R. Incidental radiological findings of susuk in the orofacial region. Dentomaxillofac Radiol 2006;35(6):473-4.
7. Teo LL, Seto KY, Chai P, Venkatesh SK. Embolised injection needle fragment to the heart, mimicking a subcutaneous charm needle. Ann Acad Med Singapore 2010;39(6):499-500.