



ORIGINAL RESEARCH PAPER

Medical Science

A NEGLECTED FOREIGN BODY (ARECA NUT) IN LEFT NASAL CAVITY IN AN ADULT WITH UNUSUAL HISTORY

KEY WORDS:

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ABSTRACT

Nasal foreign bodies (NFB) are commonly seen in the emergency department mostly in the pediatric population, however, they might be seen in adults with psychiatric illness or developmental disabilities. Nasal foreign bodies are usually benign and do not require urgent intervention, however, some objects can cause severe damage and need to be removed urgently, these include things like batteries and magnets. The nasal foreign body may be obvious or may require a high index of suspicion as they may present acutely but can be missed and remain for weeks, months, or even years after insertion. Basically, foreign bodies are classified as animate and inanimate or organic and inorganic. In general, the organic foreign bodies tend to be more irritating to the nasal mucosa and tend to cause symptoms much earlier.

CASE REPORT



Fig1

- A 25 year male was presented to ENT department with complains of foul smelling left sided nasal discharge since two months.
- No history of epistaxis, nasal obstruction, fever, headache.
- Anterior rhinoscopy showed scanty foul smelling nasal discharge in left nasal cavity.
- On endoscopy mucoid discharge from left nasal cavity.
- The right nasal cavity was normal.
- A CT scan demonstrated a hypodense, mass measuring 1.5×1.5 cm in the left middle third of nasal cavity.

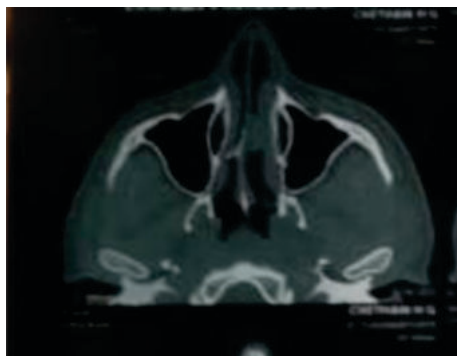


Fig2

- Operative findings during nasal examination under local anesthesia showed a large white mass measuring 1.5*1.5cm, lodged in between the septum and middle turbinate.
- Probe could be passed all around the mass, did not bleed on touch.
- Due to size of the mass it was falling back to its place on suctioning.
- The foreign body was removed into using a foreign body hook under endoscopic guidance.



Fig3

On examination of the object, it was covered with white mucous material with a firm and solid central core. Pathological analysis of the specimen showed vegetable matter with fibrin deposition and mixed inflammatory cells.



Fig4

WHY THIS CASE IS UNUSUAL?

- The patient presented with left foul smelling nasal discharge since 2 months.

- He is 25 year old male.
- After removal of mass from the left nasal cavity the patient gave history that he is an occasional areca nut chewer.
- Two months back he fell asleep with areca nut in his mouth. In the middle of the sleep he had an episode of cough. He thought that he had swallowed it. But the areca got lodged in the left nasal cavity through nasopharynx.

CONCLUSION

- A nasal foreign body should be considered as a cause for unilateral nasal obstruction and foul smelling discharge.
- Nasal foreign bodies may not have a clear insertion history, even in adolescents/ adults.

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