

WHAT IS THE LIMIT FOR GASTRIC FOREIGN BODIES MANAGEMENT?

Jara Hernandez Gutierrez, Aida Tebar Zamora, Aurelio Francisco Aranzana Gomez
General and Digestive Surgery Department, Complejo Hospitalario de Toledo, Toledo. Spain

OBJECTIVE

Of the foreign bodies that reach the stomach:

- 80 to 90% pass spontaneously through the GI tract
- 10-20% require nonoperative intervention
- ≤ 1% require surgery.

AIMS

The aim of this E-poster is to demonstrate the safety and efficacy of the laparoscopic approach for the definitive treatment in cases with **gastric foreign bodies**

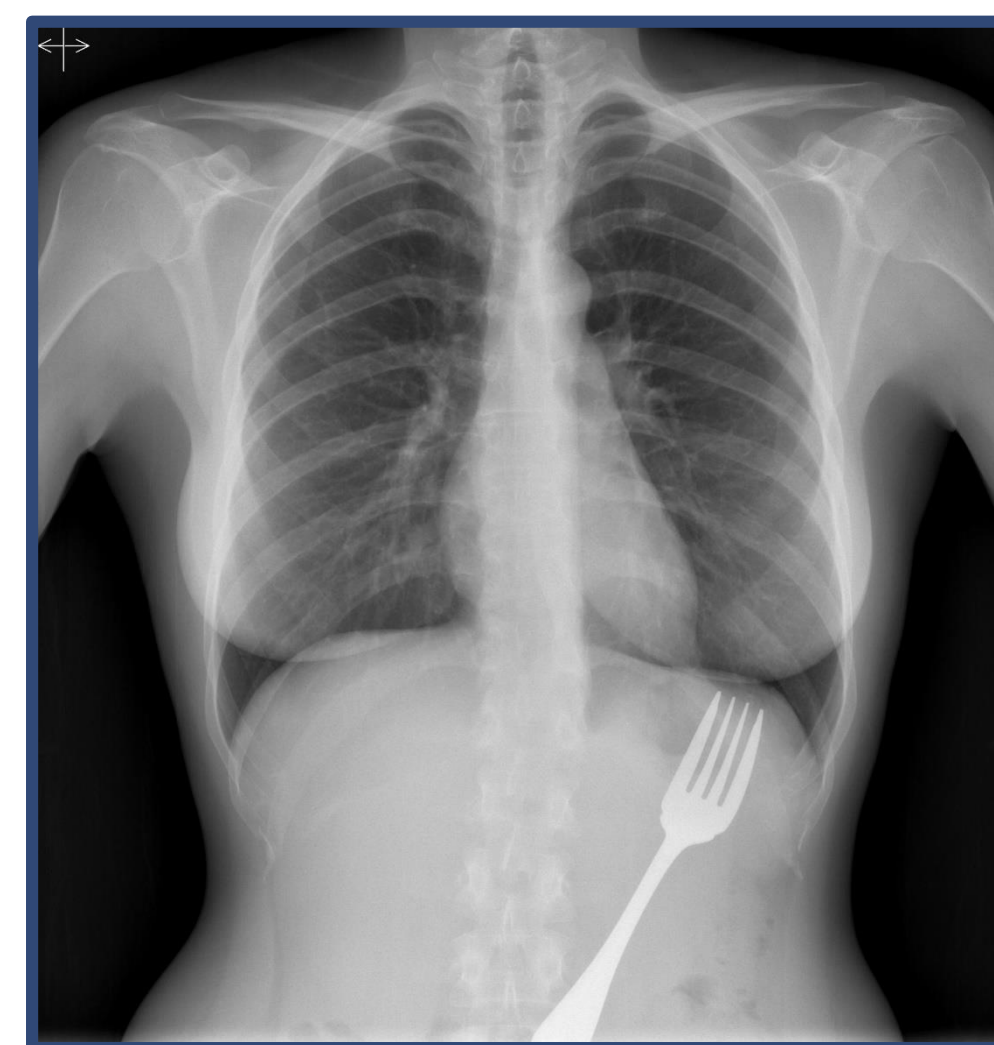
METHODS

A 32-year-old woman attends the emergency room after accidental foreign body ingestion.

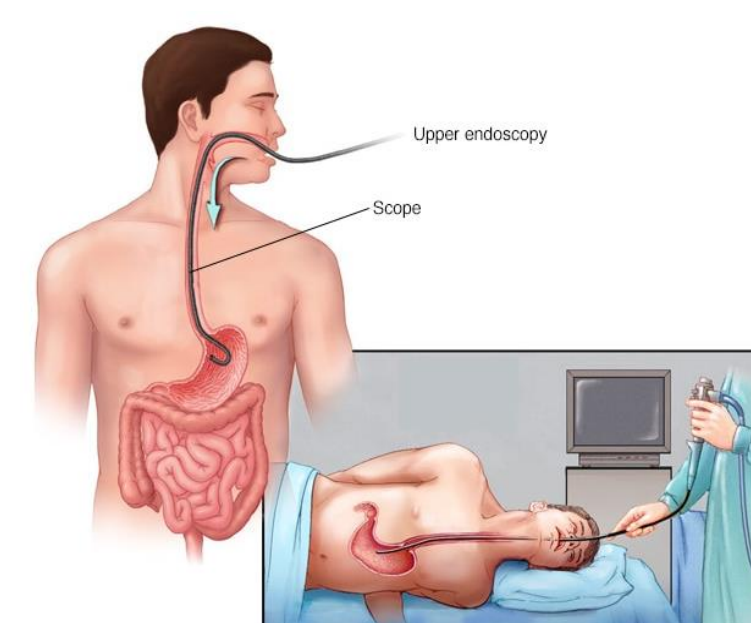
Physical examination reveals abdominal pain in the epigastrium without defense.

Abdominal **X-rays** with chest X-rays shows a fork in the epigastrium region.

An **endoscopy** was performed which allows detailed identification of the gastric foreign body but it was not possible to remove it.



Abdominal X-rays with chest X-rays shows a fork in the epigastrium region.



Upper endoscopy

RESULTS

Laparoscopic approach: 4 trocars.

Vertical anterior gastrotomy

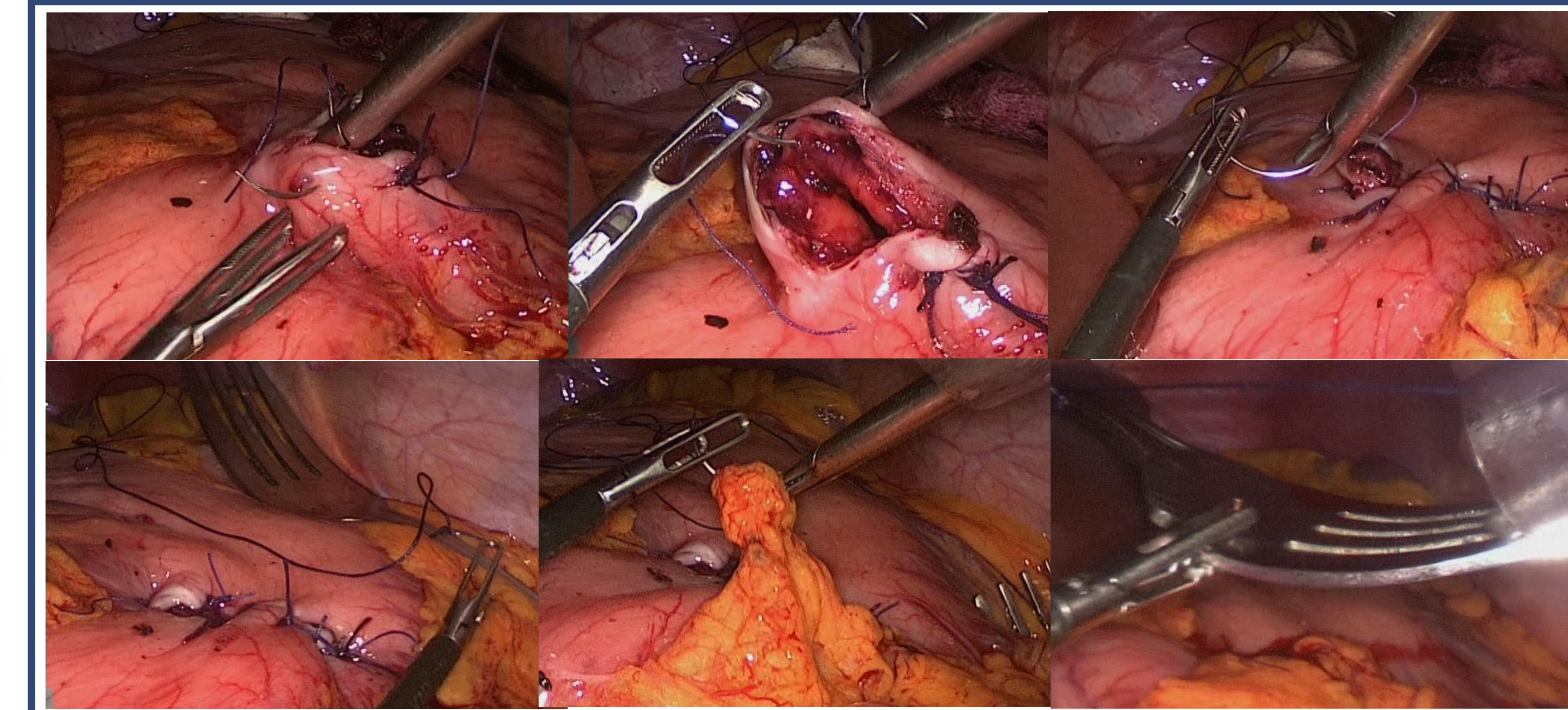
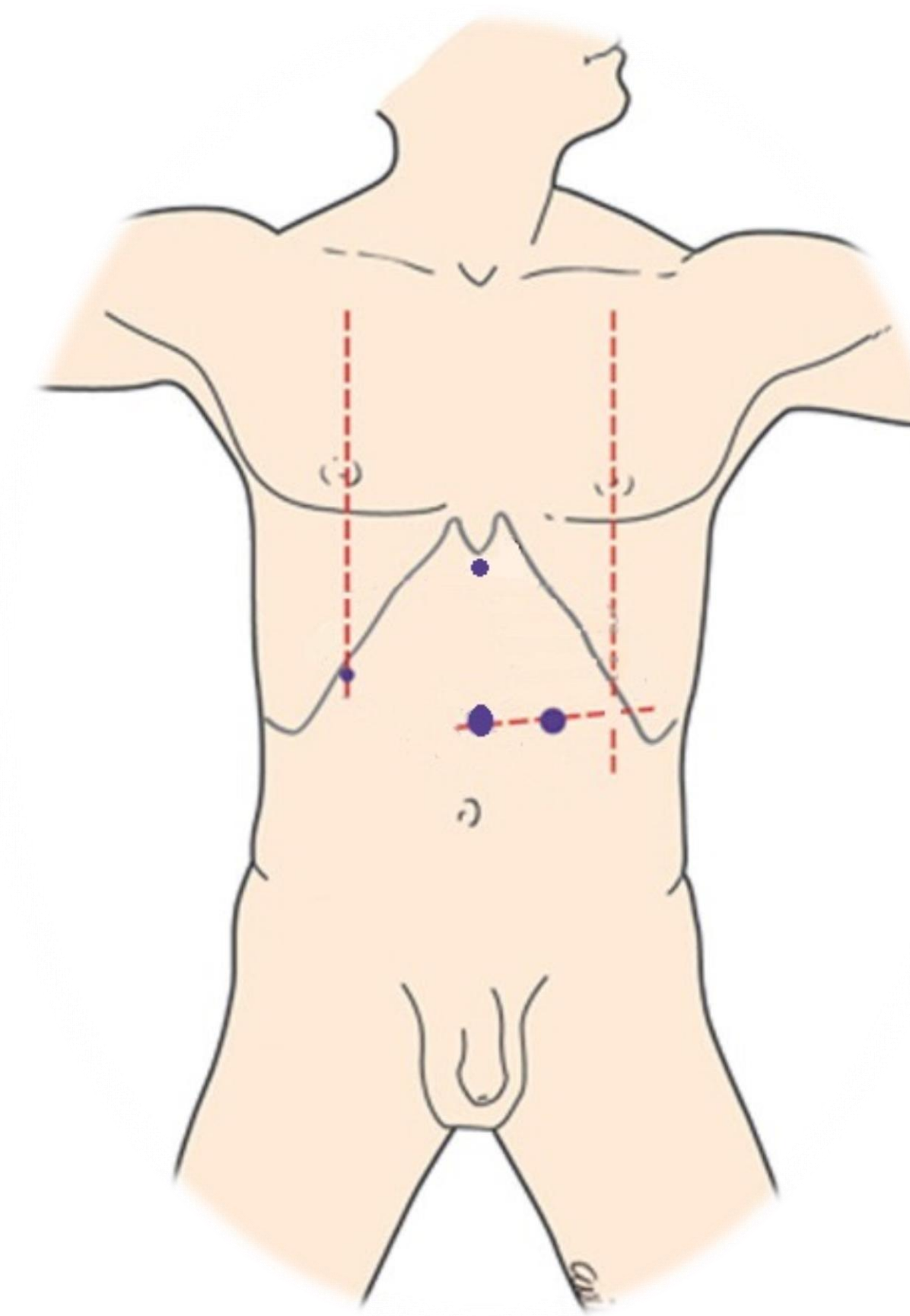
Extraction of the foreign body with endo-loop.

Washing, continuous suture of the gastrotomy in transverse with vicryl 2/0

Epiploasty with Vicryl 3/0

Extraction of the foreign body from the abdominal cavity

Successfully discharged on the 3rd PO day



CONCLUSIONS

- Usually **foreign bodies** that pass through the esophagus are asymptomatic unless perforation or obstruction occurs.
- **Imaging studies** may identify the foreign object and are useful for following the progression through the GI tract.
- Foreign bodies management depends on several factors: location of the object, nature of the object and symptoms and signs. Management depends on the nature of the object, but sharp objects should be retrieved from the GI tract.
- The **laparoscopic approach** is a valid alternative in the treatment of big foreign bodies and the size does not contraindicate this type of approach in advanced laparoscopic skilled surgeon.

C.H. Toledo

References:

- ASGE Standards of Practice Committee, Ikenberry SO, Jue TL, Anderson MA, et al: Management of ingested foreign bodies and food impactions. *Gastrointest Endosc* 73:1085–1091, 2011. doi: 10.1016/j.gie.2010.11.010.