Original Article

Increase In Incidence Of Foreign Bodies In Ent During Pandemic Period

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Abstract

Aims and objectives:

This prospective study aims to analyze foreign bodies in a term of a type, site, age, gender of distribution, and method of removal.

Methodology:

The presence of foreign bodies in the ENT is one of the most common causes of otorhinolaryngologic emergencies. Adults and children both present with foreign body lodgment in the ENT region. The symptoms may range from asymptomatic complaints to life-threatening conditions. This study compromises cases ranging from infants to the elderly population for a period from September 2020 to July 2021. The foreign body may classify as animate and inanimate The inanimate can be further classified as hydrophilic or hydrophobic and metallic or nonmetallic. The nonmetallic is classified as vegetative and nonvegetative.

Results:

The study shows a detailed analysis of foreign bodies in a term such as a type, size, age, gender, and removal in a comparison with a pre-pandemic period.

Conclusion:

We conclude that as compared with the pre-pandemic period it shows there is an increase in the incidence of foreign bodies in otorhinolaryngology during the pandemic in both adults and children.

BACKGROUND:

A foreign body is any object in a region it is not meant to be, where it can cause harm by its mere presence if immediate medical attention is not sought. It can be commonly found in the ear, nose, and throat. The presence of foreign bodies in the ENT region is one of the most common causes of otorhinolaryngologic emergencies.

INTRODUCTION

A foreign body is any object in a region it is not meant to be, where it can cause harm by its mere presence if immediate medical attention is not sought. It can be commonly found in the ear, nose, and throat. The foreign body may classify as inanimate or animate. The inanimate can be further classified as metallic or nonmetallic and

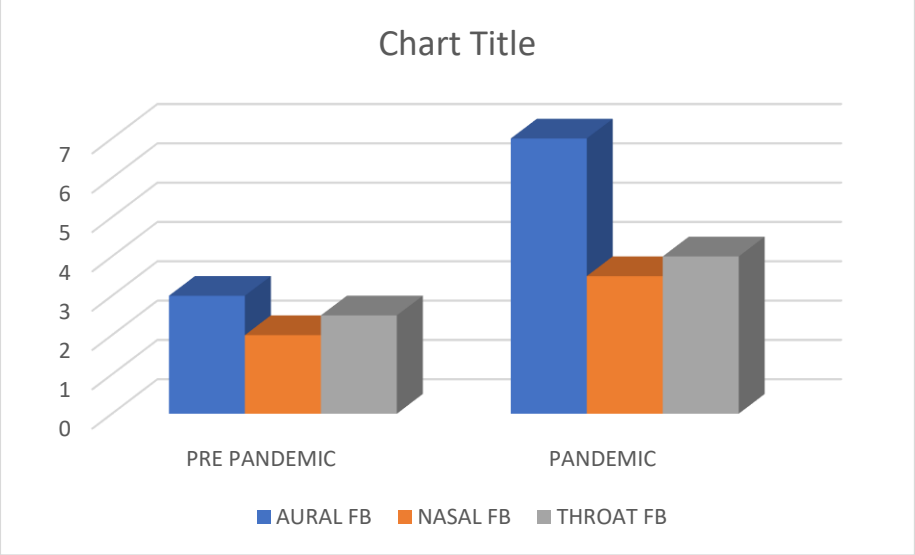
hydrophobic or hydrophilic[2]. The presence of foreign bodies in the ENT region is one of the most common causes of otorhinolaryngologic emergencies. Foreign bodies can be accidentally introduced into both adults and children. Generally, foreign bodies can commonly see in younger children, this may be due to various factors such as curiosity to explore orifices, boredom, playing, boredom, mental retardation, and attention deficit hyperactivity disorder. This is more seen in recent times compared to later decades as improvement in technology and gadget usage in children. This has been seen more during the pandemic period due to excessive time spent at home.

STUDY DESIGN

- This study was performed in the Department of ENT, Head and Neck Surgery from September 2020 to July 2021. The study population includes the number of patients with ENT foreign body lodgment who presented in the outpatient department of ent and the emergency room during the pandemic period. Otoscopic examination, anterior rhinoscopy, and examination of the oropharynx were performed to diagnose the foreign body of the ear, nose, and throat. A rigid endoscopic examination was performed in suspected cases of foreign bodies

RESULTS

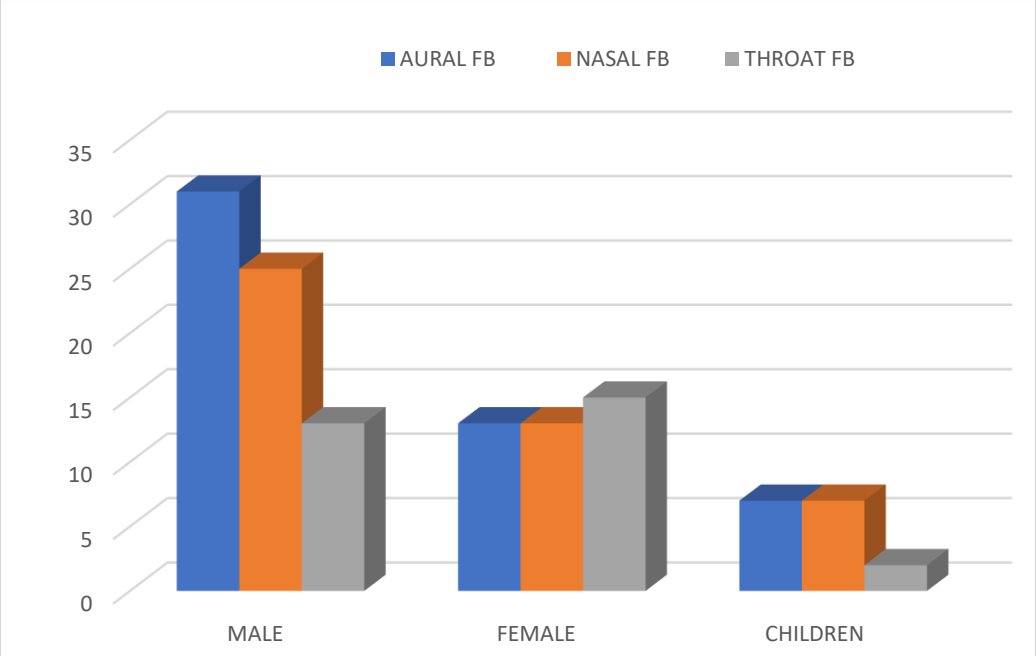
During this study period, a total of 125 patients visited the hospital with a foreign body in ENT. 50 males, 45 females, and 30 children. Of the 125 patients, 56 had foreign bodies in the ear, 43 had foreign body in the nose, and 26 had foreign bodies in the throat. The foreign body was removed with or without local anesthesia in 110 and only 10 patients required general anesthesia.



ANALYSIS

This study involves 125 cases with 85 animate and 41 inanimate. The inanimate is further classified as 25 metallics, 25 nonmetallic, 15 hydrophilic, and 15 hydrophobic. Gender distribution among the cases shows about 50 males, 45 females, and 30 children.

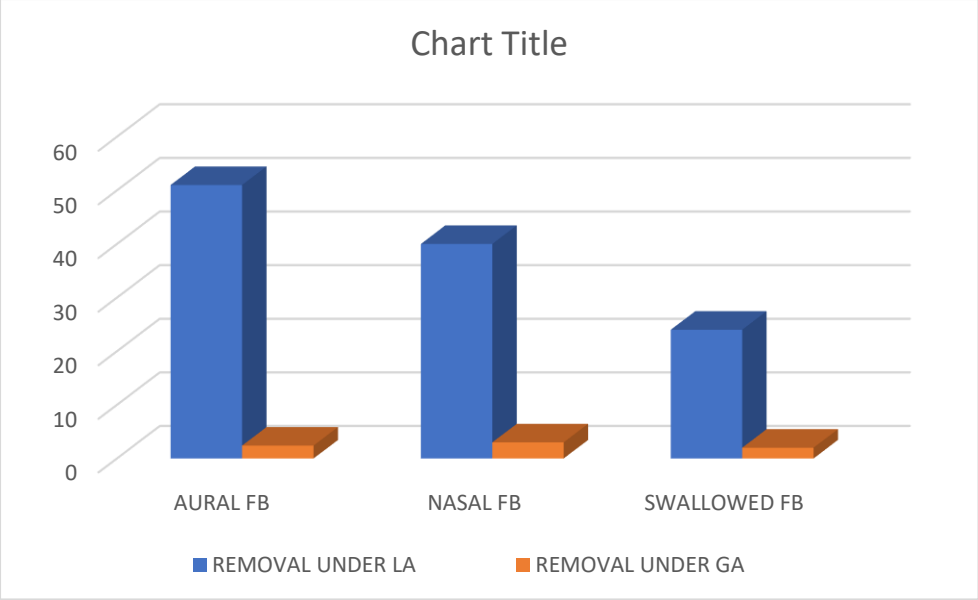
	Male	Female	Children	Total
Aural FB	31	25	13	56
Nasal FB	13	13	15	43
Throat FB	7	7	2	26
Total	50	45	30	125



METHOD OF FB REMOVAL

Removal of foreign bodies requires a proper instrument and skill. In our study, most nasal and aural foreign bodies were removed in the emergency room or OPD with or without local anesthesia. Out of 125 foreign bodies in ENT, 10 required general anesthesia for foreign body removal, and the rest were removed with or without local anesthesia.

	Removal under LA	Removal under GA	Total
Aural FB	51	5	
Nasal FB	40	3	
Swallowed FB	24	2	
Total	115	10	125



DISCUSSION

Adults and children both present with foreign body lodgment in the ENT region. Most commonly children are accompanied by anxious parents to the outpatient department or the emergency room. The symptoms may range from asymptomatic complaints to life-threatening conditions. This study compromises cases ranging from months-old babies to the elderly population. In that, it involves more children cases as a curiosity of exploring orifices as the main reason.

- FOREIGN BODY IN EAR

  The ear was the most common site of foreign body lodgment among younger children who not only to themselves but also their siblings or playing partners. Common ear foreign bodies in children include insects, cotton wool, plastics, bean, paddy seeds, beads, erasers, and papers. Children are brought by the parents with complaints like ear aches, ear fullness, ear discharge, continuous crying, and a history of foreign body introduction.[2] Occasionally foreign bodies are found in routine otoscopic examinations. Examination under a microscope helps to confirm the presence and exact location of the foreign body in the ear. It aids in removal under intravenous sedation or general anesthesia in cases that are not cooperative especially in children to avoid trauma to the tympanic membrane and external auditory canal. This study consists of about 56 cases of which 5 cases were removed under general anesthesia using a microscope.

- FOREIGN BODY IN NOSE

- Foreign body in the nose can be unilateral or bilateral. It is often seen in children with psychiatric disorders who have diminished growth and cognitive development. Unilateral, foul-smelling, purulent nasal discharge in children is often regarded as due to unnoticed foreign body of the nose in younger children. The common nose foreign bodies range from button batteries, camphor, seeds, pulses, plastic, building blocks, balloons, nuts, pepper, and chalk pieces[2]. Examination of the nose by anterior rhinoscopy using Thudichum Nasal Speculum in most cases reveals foreign body lodgment at the level of inferior meatus and also middle meatus in some cases. Endoscopic examination of the nasal cavities using a 0-degree endoscope was done in cases with suspected foreign bodies and it also helps to confirm the location of the foreign body[1]. It aids in removal under intravenous sedation or general anesthesia in cases who are not cooperative especially in children. This study consists of 43 cases, of which 40 were removed under local anesthesia and the remaining 3 cases were removed under general anesthesia.

➢ FOREIGN BODY IN THE THROAT

- Foreign body ingestion is a common problem seen in both adults and children. Children's most frequently swallowed foreign bodies include coins, nuts, and metallic playing places. The most common foreign bodies seen in adults and the elderly include bones (chicken bone, fish bone, mutton)[2]. Patients come with complaints such as difficulty in swallowing, foreign body sensations in the throat, and pain during swallowing. Examination of the throat followed by video laryngoscopy using a 45-degree endoscope provides the exact location of the foreign body, local trauma, vocal cord mobility, and congestion of the mucosa. A plain X-ray of soft tissue in the neck is a cost-effective radiological examination method useful in the evaluation of foreign bodies. This study consists of 26 cases, of which 24 were removed under local anesthesia and the remaining 2 cases were removed under general anesthesia.

CONCLUSION

Foreign bodies in the ear and nose were found more in children and foreign bodies in the throat were found more in adults and elderly people. And the incidence of foreign bodies in ENT is more increased during the pandemic period due to various factors such as curiosity to explore orifices, boredom, playing, boredom, mental retardation, and attention deficit hyperactivity disorder in children and it is seen more in recent times compared to later decades as improvement in technology and gadget usage in children and excessive time spent at home.

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