A 43-year-old woman came to our emergency department after voluntarily ingesting a knife.

Her medical history included borderline personality disorder with several suicide attempts and lumbar arthrodesis. Physical examination was normal. Simple chest radiography (Fig. 1A) revealed a knife situated in the inferior third of the esophagus near the cardia, with no evidence of pneumothorax, pneumomediastinum or pneumoperitoneum. We decided to explore the area under general anesthesia and were able to extract the knife, which measured 22 cm, with an endoscopic overtube (Fig. 1B).

Flexible endoscopy used under general anesthesia and with the supervision of a surgeon is a tool that should be considered for the removal of gastrointestinal foreign bodies.

Please cite this article as: Olivares Ripoll V, López López V, Amate Tortosa E, Gil Gómez E. Extracción de un cuchillo ingerido impactado en el esófago mediante endoscopia flexible. Cir Esp. 2015;93:252.

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