IMAGES IN OTORHINOLARYNGOLOGY

Foreign Body in the Larynx in an Infant ∗

cuerpo extraño en laringe en un lactante

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An infant male patient aged one presented at the Respiratory Endoscopy Department with a 2-month history of inspiratory and expiratory stridor, together with dysphonia and a croupy cough. He received medical treatment for laryngitis but did not respond to it. The patient had no difficulty swallowing nor did he have a perinatal pathological history. The mother stated that the stridor had suddenly begun one night after the child had difficulty breathing and a cough, whilst playing with a plastic bag.

A fibreoptic laryngoscopy and subsequently a direct laryngoscopy were performed under general anaesthetic, which disclosed a foreign body between the vocal chords (Fig. 1). Grip forceps were used to remove a plastic film (Fig. 2). We observed a lesion on the laryngeal surface of the epiglottis and granulomas on the subglottis (Fig. 2B) caused by pressure from the object. This was resected with cup-shaped forceps and topical Mitomycin C was applied.

The patient immediately made excellent progress. He was fed orally and received postoperative treatment with antibiotics and corticosteroids.

The aspiration of foreign bodies is a preventable occurrence which is mainly observed in infants under 3, causing significant morbimortality. Clinical presentation may be similar to different disorders, delaying a correct diagnosis. A history (positive history) of choking or a cough combined with difficulty breathing in a previously healthy child who was playing and/or eating should never be ignored. We would stress the need for preventative measures and wider awareness-raising activities in the community and among health professionals with regards to this problem.

Figure 1

Figure 2


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