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Summary

When brushing teeth becomes a challenge: Foreign body removal

Arianna Parrella

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Nurses

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The speaker presented an 18-year-old autistic patient with an entire toothbrush lodged in the duodenum for over 24 hours, removed using a protective hood and snare, emphasizing the importance of tailoring extraction techniques to individual cases while adhering to guideline principles.

KEY POINTS

- The speaker reported finding an entire toothbrush extending from the duodenal bulb to the second portion in a patient who initially denied foreign body ingestion history, with multiple esophageal ulcers but normal stomach.
- The speaker used a protective hood and snare to drag the brush into the stomach, attempted multiple rotations to position hardened bristles inside the cap, and successfully removed it despite the brush becoming stuck in the cricoid requiring manual assistance from the anesthesiologist.
- The speaker stated ESG guidelines recommend urgent gastroscopy within 24 hours for large, sharp, or battery foreign bodies in the stomach, and suggest tailoring extraction devices to each case rather than following rigid protocols.
- The speaker emphasized that endoscopists should know their available devices, know the guidelines, tailor techniques to each patient, maintain team focus during procedures, and share knowledge about foreign body cases among colleagues including nurses.
- Post-procedure X-ray was performed after parents revealed this was not the first foreign body ingestion, and the speaker noted the toothbrush texture indicated it had been swallowed more than 24 hours before presentation.

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