EGG SHELL IN THE LARYNX

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THERE are many cases of foreign body in the larynx which present difficulties in diagnosis. Many present a puzzling emergency to the Laryngologist.

Chevalier Jackson in his monogram of "Canned experiences" describes at length endless types of foreign body in the respiratory tract and the problems facing their safe removal. Several instruments have been devised to suit the fads of individual surgeons. Every Laryngologist has a cherished collection of foreign bodies removed, ranging from coins, beads, small toys, nuts and bolts, etc.

An unusual presentation of egg shell in the glottic space warrants this case report.

Case Report

On the morning of *July 28th, 1962*, S.C. a girl of 2 years of age, was having a boiled egg for her breakfast. After completion of the meal the child handed over the crumbled egg shell to her mother, who, however, noticed a considerable amount of egg white still left behind. She scraped the valuable nutrient from the shell with a spoon and coaxed her daughter to finish the last morsel. The egg shell having been crumpled by the child prior to handing over, it was not noticed by her mother whether any shell was accidentally picked up during the scooping process. As the infant swallowed, there followed a sudden fit of coughing and spasmodic retching. The mother tried first aid measures and tilted the girl over the kitchen sink and encouraged her to cough and spit out. She further adopted palliative measures to encourage bringing out any obstruction in the throat. The ordeal ended after spitting out the morsel of food and the child appeared quiet. The mother brought the child to the Casualty Department for an opinion.

When seen the child was quiet, breathing normally, and there was no stridor. She was comfortably seated in her mother's lap eating bread. Despite endless coaxing the girl would not open her mouth or co-operate towards any examination, having undergone the previous ordeal at breakfast shortly before this,

Lungs showed no changes in air entry or any adventitious noises to cause anxiety. There was no stridor. The Radiographer expressed doubts about the egg shell being visible or throwing any contrast shadow on a film for clear demarcation and radiographs were not taken.

The fact that the foreign body, if any, may have been coughed out with the morsel of food, and the mother only believed that the shell may have been incorporated at the time she scooped out the contents, it was decided to send the child home, for her to be brought back the following day if any symptoms developed.

The child was seen again 48 hours later on *July 30th, 1962*. She was comfortable, not cyanotic and had a weak audible stridor which merged with the

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adventitious chest noises. Moist rales could be heard in the chest without the use of the stethoscope. This time the girl was acquainted with the nursing staff and hospital atmosphere. She was induced into conversation. Her voice was very feeble but quite distinct.

X-ray showed no evidence of pulmonary disease. An opacity was seen high in the neck in the midline. It was thought to be the piece of egg shell in œsophagus or larynx.

Laryngoscopy was performed by Mr. Moulden under general anæsthesia. A piece of egg shell, triangular in shape 1 cm. × ¾ cm., was found wedged in the glottis, and held in position due to its shape and irregular surface. This piece of egg shell was easily removed. The depth of trachea was visible due to widely abducted cords. A tiny piece of shell, sized 2 mm. × 1 mm., was located at the level of the *Carina* and was removed by a suction tube.

After about 4 hours the child suddenly became restless, stridorous and cyanotic and needed an emergency tracheostomy. She further developed aspiration broncho-pneumonia. Swab culture yielded routine organisms. The temperature was elevated to 100° F. on one occasion only. It remained normal subsequently till discharge. The Tracheostomy tube was removed on *August 8th, 1962*.

X-ray chest on *August 10th, 1962* showed shadowing in the right lower zone due to consolidation. On *August 17th, 1962*, a further X-ray showed improvement and on *August 21st* there was complete resolution. The patient was discharged from hospital on *August 23rd, 1962*.

Conclusion

Chevalier Jackson has mentioned "a flat thin foreign body may lodge in the antero-posterior position between the cords and remain there with surprisingly little impairment of voice".

This case records the presence of a piece of egg-shell impacted in the glottis of a child of 2 years of age and giving rise to no symptoms or stridor, beyond initial spasmodic cough, for 48 hours.

The egg-shell was impacted in the glottis in such a way that it divided the space into two streams and yet due to its thinness gave rise to no stridor for the first 48 hours.

Stridor made its appearance again 4 hours after endoscopic manipulation under general anæsthesia.

Acknowledgement

I am grateful to Mr. Moulden, Consulting Ear-Nose-Throat Surgeon to Children's Hospital, Birkenhead, in his kindness and help towards reporting this case of unusual foreign body in the larynx of a 2 year old child.

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