Glottic Foreign Body Removal: A Novel Approach

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To the Editor: Foreign body in glottis presents as a dire emergency and is mostly fatal before child can access medical care. Securing airway during removal is a major concern.

An 11-mo-old tachypneic male child presented with 1 day history of aspirated broken metal toy. X-ray delineated metallic foil at the level of glottis extending to subglottis. Emergency removal was planned. Airway control was dilemmatic in view of anticipated laryngeal spasm and likely airway bleed during instrumentation. Endotracheal intubation was not feasible. Bag mask ventilation was likely to dislodge the foreign body. Prophylactic tracheostomy would secure the airway but predisposed to the morbidity of tracheal opening in an infant.

We preferred General Anaesthesia with pretracheostomy wherein trachea was exposed and stay sutures passed through anterior tracheal wall for immediate tracheotomy, if required. Anesthetic laryngoscope was introduced and metal piece visualized with camera mounted on transoral 0° Hopkins nasal endoscope. This was firmly grasped with bronchoscopy forceps and removed under magnified vision. Check bronchoscopy was normal. There was no trauma or laryngeal spasm. Child was discharged next day with uneventful follow up.

This novel surgical and ventilatory technique allowed us to remove glottic foreign body uneventfully under magnified vision. Only 2 cases of glottic foreign bodies have been

published. Kumkum et al. removed foreign body using anaesthetic laryngoscope with Magills forceps [1]. Mundra et al. removed it with ventilating bronchoscope without optical instruments [2]. Exposure of anterior tracheal wall without tracheostomy has been documented in a patient undergoing open partial laryngectomy [3]. For glottic foreign bodies such pretracheostomy prevents airway compromise while avoiding the morbidities of a prophylactic tracheostomy in case of successful endolaryngeal ventilation.

Compliance with Ethical Standards

Conflict of Interest None.

References

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