A 47-year-old man from Surinam came to the emergency room because of a progressive burning chest pain. The pain had arisen acutely 2 days previously during dinner, increasing over time and restricting his oral intake because eating aggravated the pain.

The patient had a medical history of chronic alcoholic pancreatitis and type 2 diabetes mellitus. Physical examination revealed an ill and confused man with fever and tachycardia. The results of laboratory tests showed elevated infection parameters, with nor- malse levels of mal hemoglobin, amylase, and bilirubin.

Endoscopy with the patient under conscious sedation revealed a large fish bone that was bilaterally stuck in the proximal esophagus (Fig. 2). A two-channel therapeutic endoscope was used, and a 15-mm CRE balloon catheter (Boston Scientific, Marlborough, Massachusetts, USA) was inserted in the first channel. The balloon was inflated distal to the fish bone, which released the bone on one side, this being accompanied by a discharge of pus. A grasping forceps (FG-44NR-1; Olympus, Marlborough, Massachusetts, USA) was inserted via the second channel to retrieve the bone, removing it whole without additional injury [1, 2]. Because the mucosa was only mildly damaged, it was not necessary to perform an esophagogram. The patient was subsequently treated with intravenous amoxicillin/clavulanic acid for 1 week and intravenous cefuroxime for an additional week.

The swallowing of fish bones and the injuries that occur as a consequence of this are not uncommon in Asian countries, where the consumption of fish that have more and/or smaller bones is enjoyed [3, 4]. Though these types of fish are not frequently consumed by Europeans, many European countries have Asian diaspora and Asian foods available. Dried “trapoen” is a popular dish in the Surinamese community. Because the fish is dried, it has to be cooked whole. It is eaten by using the teeth to remove the flesh from the bone. This, combined with the loose bones present in the dish, frequently results in fish bones being swallowed.

Endoscopy_UCTN_Code_CCL_1AB_2AF

Competing interests: None

References

Bibliography
DOI http://dx.doi.org/10.1055/s-0035-1569660
Endoscopy 2016; 48: E3
© Georg Thieme Verlag KG Stuttgart - New York
ISSN 0013-726X

Corresponding author
Mahajan Mandhkani, MD
Department of Surgery
Erasmus Medical Center
3015 CE Rotterdam
Netherlands
mahajanmchi@gmail.com

Mahajan Mandhkani et al. Esophageal fishbone impaction after ingesting “trapoen”... Endoscopy 2016; 48: E3