

Endoscopic Removal of a Large Gastric Metallic Watch with a Polypectomy Snare Loop

Advances in flexible endoscopy and techniques have made possible the extraction of foreign bodies from the stomach (1–4). We used a polypectomy snare loop to fasten a metallic watch and simultaneously induce a gag reflex to remove a large metallic watch from the stomach of a 28-year-old female patient who attempted to commit suicide by swallowing a large metallic watch for two days. Laparotomy with gastrotomy to remove the metallic watch was suggested by a local hospital. The patient refused to accept an operation and was sent to our hospital for further evaluation. A plain abdominal radiograph revealed a large radiopaque material over the left upper quadrant (Figure 1). Endoscopy (Olympus GIF XQ 200, Tokyo) found a large metallic watch impacted into the posterior wall of fundus. A polypectomy snare loop was used to fasten the metallic watch (Figure 2), and attempts were made to remove the watch. The watch could not be removed through the throat during the first two attempts. Therefore, we induced a gag reflex using the patient's finger to dig her throat and simultaneously removed the watch from the throat. The diameter of the watchcase was 3.5 cm and the length of the watch chain was 19.5 cm. The polypectomy snare loop combined with a gag reflex is an easy and effective method of endoscopic retrieval of a large gastric foreign body. To prevent the risk of an aspiration or suffocation accident, fasting



Figure 1: Plain abdominal radiograph demonstrating a radiopaque material in the stomach.



Figure 2: Close-up of a polypectomy snare loop fastening the metallic watch in the esophagus.

more than eight hours and asking the patient to lie on his or her side during endoscopic manipulation are necessary.

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