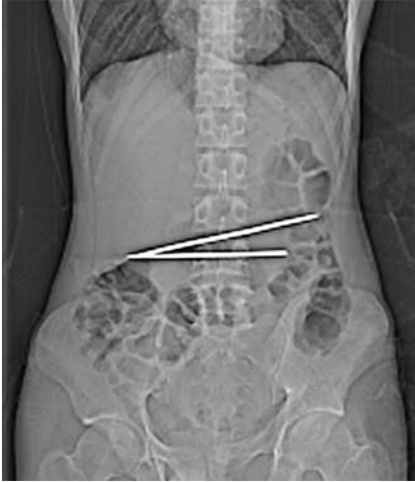
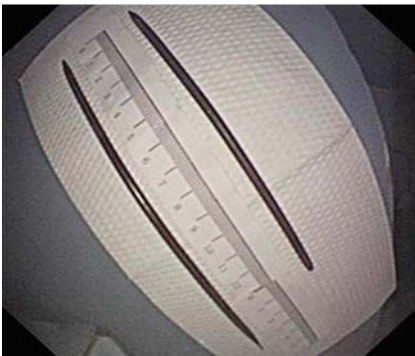


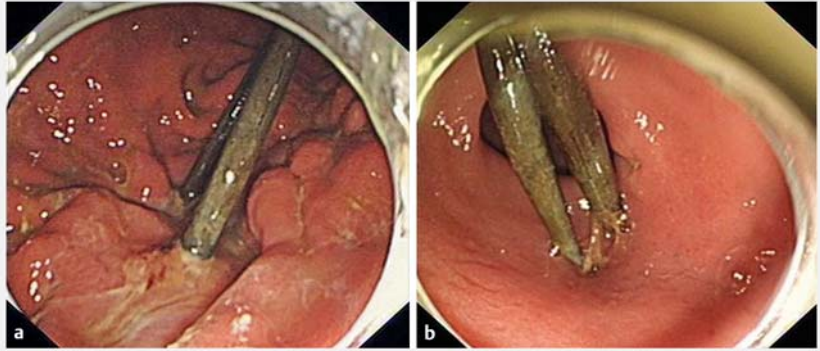
Endoscopic removal of two long iron rods impacted in the stomach



► **Fig. 1** Two long rods impacted in the stomach as shown on abdominal imaging.



► **Fig. 3** The two rods of more than 10 cm in length, after removal.



► **Fig. 2 a** The proximal ends of the rods impacted in the gastric body. **b** The distal ends of the rods impacted in the gastric antrum



► **Video 1** Endoscopic removal, by means of grasping forceps, of two long iron rods impacted in the stomach.

A 20-year-old man was referred for left epigastralgia, with a history of eating barbecued food and alcoholic intoxication 2 days earlier. On physical examination, he had abdominal tension and tenderness, without obvious rebound pain. Abdominal imaging revealed two long rods (17 cm and 13 cm) in the stomach, without signs of perforation or other conditions (► **Fig. 1**). Upper endoscopy revealed that the proximal ends of the iron rods were impacted in the gastric body (► **Fig. 2a**), while the distal ends were impacted in the gastric an-

trum (► **Fig. 2b**). We used endoscopic grasping forceps to gently grip the proximal ends of the rods and remove them as we withdrew the endoscope (► **Fig. 3**, ► **Video 1**). There was no perforation, and only surrounding mucosal hyperemia and edema were noted. The patient's symptoms disappeared, and he was discharged from our hospital on the same day.

Ingested long foreign bodies are always associated with high rates of perforation,

and urgent endoscopic intervention is strongly recommended [1]. A snare, basket, overtube, or even a double-channel endoscope may be helpful to remove such long objects [2, 3]; however, it is extremely difficult to remove objects longer than 10 cm, and surgery is frequently required [3]. In the present case, we demonstrated the use of grasping forceps for successful removal of two iron rods that were more than 10 cm in length, each with both ends impacted in

the stomach. We suggest that grasping forceps can also play a positive role in the extraction of impacted long foreign bodies. Maneuvering the proximal end of the object into the transparent cap of the endoscope is beneficial for preventing mucosal injury.

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Competing interests

All authors disclose no conflicts relevant to this article.

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