Endoscopic removal of metal bottle cap from the esophagus

A 22-year-old man was admitted to the emergency department with dysphagia and chest pain after inadvertently swallowing a metal bottle cap. Two hours earlier, he had opened a bottle of cider using his teeth and accidentally swallowed the bottle cap with the first sip of cider. After the incident, he was able to swallow fluids and saliva. He had no other previous medical history and no background of psychiatric illness. His vital signs were within normal limits. Physical examination revealed no abnormalities.

Thoracoabdominal radiograph showed a foreign body (the bottle cap) in the proximal part of the esophagus with no signs of perforation (Fig. 1). With the assistance of an anesthesiologist, the patient underwent esophagogastroduodenoscopy and the bottle cap was seen in the esophagus (Fig. 2). The cap was difficult to retrieve because it was quite large and sharp. In order to avoid mucosal trauma, an endoscope with overtube (Guardus Overtube; US Endoscopy, Mentor, Ohio, USA) was inserted. The foreign body was then safely withdrawn under direct visualization using grasping forceps (Rat tooth and alligator jaw grasping forceps; Olympus, Tokyo, Japan) (Fig. 3, Video 1). After removal of the foreign body, the endoscope was reintroduced, and further examination revealed no sign of complications.

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Video 1: Radiographic view and endoscopic removal of the metal bottle cap from the esophagus.

Fig. 1 Radiograph showing foreign metallic body (bottle cap) in the proximal part of the esophagus. a Lateral view. b Posterior-anterior view.

Competing interests

None
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