

# Delayed diagnosis of a foreign body in the tongue

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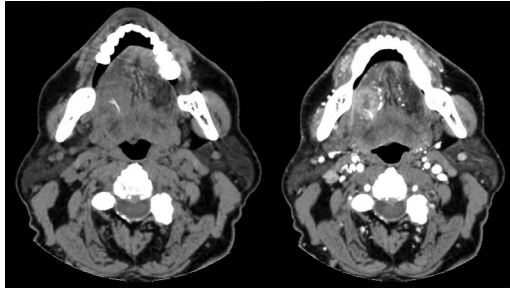
## DESCRIPTION

A 70 year-old man presented with 1-month history of progressive pain in the tongue after eating fish. The patient stated that he had sought medical care back then, but since no foreign body was found he was discharged with paracetamol. Physical examination revealed a mass located in the middle third of

the right edge of the tongue with 1.5 cm of diameter, with mild inflammatory signs.

Contrast-enhanced CT scan of the pharynx revealed the presence of an abscess embedded in the tongue surrounding a radio-opaque foreign body (figure 1). A fish bone was removed surgically by making a 1 cm incision over the mass on the right side of the tongue under general anaesthesia (figure 2). Therapy was complemented with ceftriaxone, clindamycin and methylprednisolone. On 3-month follow-up, the patient had a fully healed tongue with complete regression of the mass and with no neuromuscular sequelae.

Foreign bodies in the upper aerodigestive tract are a frequent emergency in Otorhinolaryngology practice.<sup>1</sup> Foreign bodies are usually found superficially on the tongue and are easily removed by the patient or the doctor.<sup>1</sup> However, foreign bodies located deep inside the tongue are a rare occurrence leading frequently to a delayed diagnosis.<sup>1 2</sup> If left unnoticed a foreign body embedded in the tongue can cause severe infection and consequently airway obstruction and death.<sup>1 3</sup>



**Figure 1** Abscess embedded in the tongue surrounding a radio-opaque foreign body with ~15 mm in size.



**Figure 2** Foreign body removed from the tongue.

## Learning points

- ▶ Deeply embedded foreign body in the tongue musculature are not easily suspected.
- ▶ History of trauma should always be questioned.
- ▶ Delay in diagnosis can lead to severe and even fatal complications.

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**Competing interests** None declared.

**Patient consent** Obtained.

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