

# An Impressive Case of Compulsive Chicken Bones Ingestion

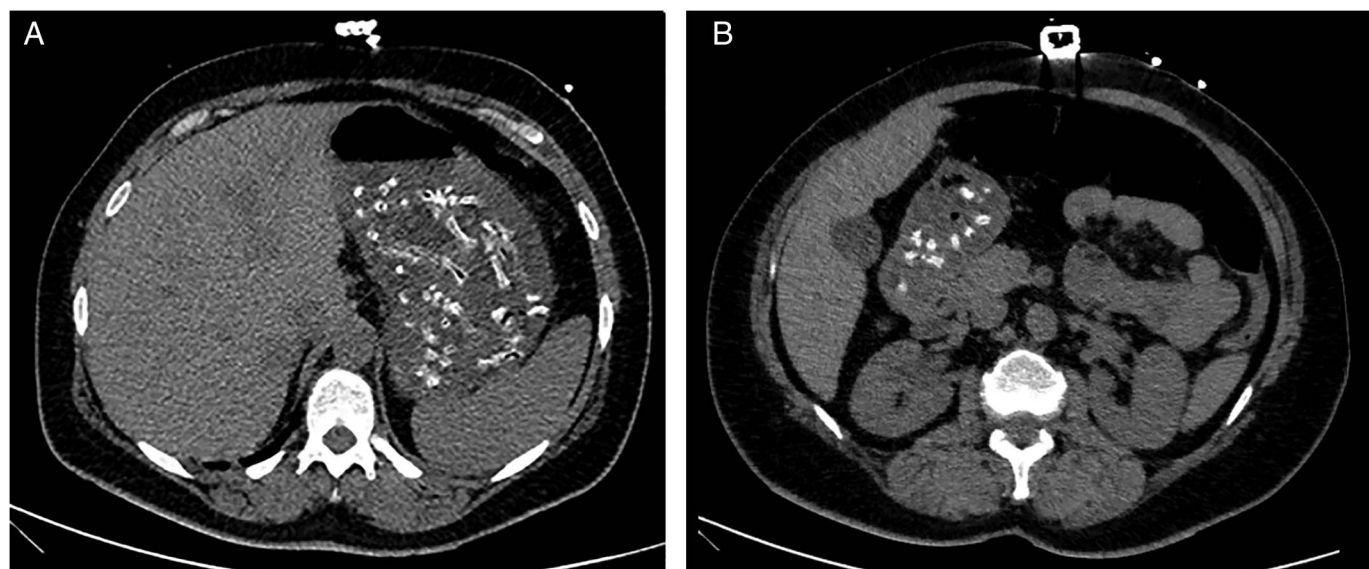
Isabel Garrido, MD<sup>1,2</sup>, Pedro Moutinho-Ribeiro, MD<sup>1,2</sup>, and Guilherme Macedo, MD, PhD<sup>1,2</sup>

<sup>1</sup>Gastroenterology and Hepatology Department, Centro Hospitalar Universitário de São João, Porto, Portugal

<sup>2</sup>World Gastroenterology Organization (WGO) Porto Training Center, Porto, Portugal

## CASE REPORT

A 53-year-old woman with a medical history of depression and anxiety was admitted because of idiopathic anaphylaxis. Owing to acute respiratory failure, she underwent a thoracic computed tomography scan, which revealed a large number of bone fragments inside the stomach and duodenum (Figure 1). The patient was evaluated by psychiatry and admitted because she had ingested numerous chicken legs in the context of acute alcohol intoxication. We had some concerns about the efficacy and safety of performing an upper gastrointestinal endoscopy in this scenario. Indeed, there were already some bone fragments beyond the proximal duodenum and the objects were numerous and sharp. Thus, there was a high risk of complications (e.g., perforation and aspiration) during the procedure, with the probability of successful removal of all the fragments being very low. Therefore, we chose to start treatment with metoclopramide. During hospitalization, she underwent daily abdominal imaging examinations, which showed progression of the bone fragments through the small bowel and colon (Figure 2), with no evidence of obstruction or perforation. Later, the patient started oral feeding, with good tolerance. Because she maintained abdominal pain, and to exclude local complications, a colonoscopy was performed 10 days after admission. No foreign bodies or mucosal changes were identified. Given the progressive improvement in her clinical condition, the patient was discharged and oriented to immunoallergy and psychiatry consultation.



**Figure 1.** Computed tomography scan showing multiple chicken legs inside (A) the stomach and (B) the duodenum, with no evidence of obstruction or perforation.



**Figure 2.** Computed tomography scan showing the progression of the bone fragments through the small bowel and colon, without complications.

We report an impressive case of ingestion of large amounts of chicken bones, which crossed the entire gastrointestinal tract without complications and only minor symptoms. Foreign body ingestion remains a common problem both in pediatric and adult populations.<sup>1,2</sup> The associated morbidity and mortality are significant, with some reports estimating that nearly 1,500 deaths occur annually in the United States due to foreign body ingestion.<sup>3</sup> In fact, sharp foreign bodies such as chicken bones can lead to acute and life-threatening complications, such as obstruction, hemorrhage, perforation, and associated infection, including peritonitis and sepsis.<sup>4</sup> Complications and their severity are usually related to the object ingested, its location, and the amount of time that has passed since the ingestion.<sup>5</sup> Gastrointestinal tract obstruction and perforations

have been reported in all segments but tend to occur at sites of acute angulation.

## DISCLOSURES

Authors contributions: I. Garrido drafted the manuscript and is the guarantor of the article. I. Garrido, P. Moutinho-Ribeiro, and G. Macedo critically revised and finalized the manuscript. All authors approved the final version of the manuscript.

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Informed consent was obtained for this case report.

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## REFERENCES

1. Speidel AJ, Wölflé L, Mayer B, et al. Increase in foreign body and harmful substance ingestion and associated complications in children: A retrospective study of 1199 cases from 2005 to 2017. *BMC Pediatr.* 2020;20(1):560.
2. Ambe P, Weber SA, Schauer M, et al. Swallowed foreign bodies in adults. *Dtsch Arztebl Int.* 2012;109(50):869–75.
3. Yao C-C, Wu I-T, Lu L-S, et al. Endoscopic management of foreign bodies in the upper gastrointestinal tract of adults. *Biomed Res Int.* 2015;2015: 658602.
4. Fosi S, Altobelli S, Bindi A, et al. Gradual colonic impaction of a chicken bone associated with inflammatory pseudotumor formation and non-occlusive colon ischemia. *Case Rep Radiol.* 2014;2014:215465.
5. Okan İ, Akbaş A, Küpeli M, et al. Management of foreign body ingestion and food impaction in adults: A cross-sectional study. *Ulus Travma Acil Cerrahi Derg.* 2019;25(2):159–66.

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