

# Foreign Body Mimics Pathology: A Case Report

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## Introduction

Children are at an increased risk of foreign body aspiration due to the higher likelihood of introduction of foreign bodies into the oral cavity and decreased masticatory function due to lack of posterior dentition at earlier ages [1]. However, reports of adherence of foreign bodies to the oral soft tissues presenting with similarities to oral pathology are limited. This case report outlines a pediatric patient that presented with a foreign body that mimics oral pathology.

## Case Report

An 18-month-old male patient presented to the Pediatric Emergency Department at the University Medical Center in Las Vegas, Nevada with the chief complaint of an acute, yellow discoloration of the gingival tissue in the posterior upper right area. Father reported that yellow discoloration was first noticed earlier that morning. A phone consult was completed with the University of Nevada School of Dental Medicine Pediatric Dental Clinic. The lesion was presented via phone as a yellow lesion on the posterior maxilla that was suspicious for oral pathology. The clinical presentation of the lesion can be observed in figures 1 and 2 (Photos provided by the University Medical Center, Las Vegas). Upon clinical evaluation by the UNLV Pediatric Dental Clinic the lesion was described as a well-defined, yellow lesion approximately 1 cm in diameter located on the right posterior alveolar ridge (over site of tooth #A) similar in firmness to the surrounding tissues. No pain, discomfort or fever reported. The differential diagnosis included foreign body, eruption cyst and Bohn's nodule. Based on the clinical presentation and symptoms it was determined that the lesion was a foreign body and immediate removal was indicated. A throat pack using 4x4 gauze was placed and the foreign body was removed using digit pressure. The foreign body was determined to be a round, rubber toy with a tacky substance, indicative of chewing gum, present in the internal portion. The removed foreign body is depicted in figures 3 and 4.

## Discussion

In this case the patient had gone several hours with the foreign body in the oral cavity prior to removal. A foreign body located in the oral cavity has the risk of aspiration. When a foreign body remains in the oral cavity for an extended period of time, particularly in a younger patient, the risk of aspiration increases. Early identification is vital in decreasing the chances of aspiration. Anticipatory guidance can also be valuable in the prevention of foreign body aspiration. Aspiration of a foreign body can lead to airway obstruction, hypoxic-ischemic brain injury, pulmonary hemorrhage, need for bronchoscopy for retrieval or death [1].

## Conclusion

This case demonstrates the importance of oral pathology recognition in diagnosing and subsequently providing proper treatment promptly. Prompt treatment in this case is vital in decreasing the risk of future complications, such as aspiration of the foreign body. Risk of aspiration of a foreign body may also be decreased by thorough anticipatory guidance, in regards to the topic, with the patient's parent or guardian.



Figure 1: Initial Presentation (View 1)



Figure 2: Initial Presentation (View 2)



Figure 3: Foreign Body Removed (View 1)



Figure 4: Foreign Body Removed (View 2)

## References

1. Cramer, N., Taylor, R., Tavarez, M., & Jabbour, N. (n.d.). *Foreign body aspiration - statpearls - NCBI bookshelf*. National Library of Medicine. <https://www.ncbi.nlm.nih.gov/books/NBK531480/>