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RESEARCH ARTICLE

LAPAROSCOPIC APPROACH TO AN EPIPLOIC FOREIGN BODY: A CASE REPORT

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Abstract

The omentum represents one of the rarest locations of foreign body. The laparoscopic approach represents an ideal alternative to laparotomy.

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Introduction:-

The epiploic foreign body represents one of the most unusual localizations. Typically most of these foreign bodies arrive at the omentum after perforating a digestive loop, but in some cases they pass the omentum through the anterior abdominal wall.

The laparoscopic approach is the least invasive method for extraction.

Case Report :

We report the case of a 38-year-old young male who came to our hospital to ask for the removal of two intra-abdominal needles that had been inserted voluntarily through the anterior abdominal wall during a suicide attempt 2 years ago.

On clinical examination, the abdomen was soft and without tenderness. The biological work-up was unremarkable. The abdominal X ray showed two 40 mm thin metallic foreign bodies resembling needles. (Figure 1) The abdominal CT scan showed two metallic foreign bodies behind the right rectus muscle and in the left parieto-colonic gutter, each more than 35 mm long, with no signs of digestive perforation or abscess. (Figure2)

A laparoscopic approach was approved. The patient was installed in the reverse Trendelenburg position; the abdomen is approached via the umbilicus through the insertion of a 10mm trocar, followed by the insertion of the laparoscope to explore the abdominal cavity. There was no peritoneal inflammation, abscess, or intestinal content. The needles were detected at the right rectus muscle and in the left parieto-colonic gutter and extracted successfully. (figure 3) (figure 4) There was an absence of any postoperative complications

Discussion:-

The handling of intra abdominal foreign bodies depends on type size, location and patient age [1]. The danger of foreign bodies lies in their length and size , their extraction should be carried out as carefully as possible ,which is why the laparoscopic method remains the safest way [1].

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Most foreign bodies are ingested accidentally or intentionally, they arrive rarely in the abdominal cavity through the abdominal wall [2].

When a foreign body penetrates to the abdomen it leads to a peritoneal reaction with sometimes the formation of abscess but in rare cases the presence of the foreign body remains asymptomatic due to small size of metallic object [3].

The CT scan allows a better localization of the object and specifies nature and the associated damages [3].

The laparoscopic approach remains a less invasive, less painful alternative for foreign body management [4].and offers also less morbidity and faster recovery unlike laparotomy which is no longer used [5].

Figures :



Figure 1:- Abdominal X ray : Metallic foreign body (red arrow).



Figure 2:- Abdominal CT :two metallic foreign bodies behind the right rectus muscle and in the left parieto-colonic gutter (yellow arrow).



Figure 3:- Intraoperative photo of laparoscopic extraction of the two needles.



Figure 4:- Picture of the two needles after extraction.

Conclusion:-

The Laparoscopic approach remains a successful method for foreign body management. Most often these bodies are asymptomatic and they can be hard to find and to extract.

Conflict of interest statement:

The authors declare no conflicts of interest.

Author's Contribution

Zakaria Elmoutassim : Conception of the work, Drafting the work, Final approval of the version to be published, Agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved

Richard Sensevy : Conception of the work, Drafting the work, Final approval of the version to be published

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