



PHOTO

Dental implant screwdriver aspiration

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A 71-year-old male, former smoker, with past medical history of Chronic Obstructive Pulmonary Disease presented to pulmonology outpatients with persistent cough for the last four months, since dental procedure. Chest radiography showed a retrocardiac opacity in the right hemithorax (Fig. 1A). Computed tomography scan revealed a foreign body image in the distal portion of the intermediate bronchus, prior to division into basal pyramid (Fig. 1B). Rigid bronchoscopy confirmed the presence of a foreign body in the intermediate bronchus, without total obstruction and surrounded by granulation tissue, compatible with dental implant screwdriver (Fig. 1C-D). The dental instrument was removed and the

patient initiated a short course of glucocorticoid with successful improvement of cough.

Foreign body aspiration related to dental procedures is rare, the incidence of aspiration in root canal treatment being 0.001 per 100000.¹ The small instruments used for treatment, under saliva slippery environment, associated with local anesthesia and supine position, are favorable for instrument drop and aspiration.¹ Persistent cough is the most common symptom and can mimic chronic respiratory disease.² Aspiration episodes are often not recorded/valued.² Prompt diagnosis and intervention, guided by high index of clinical suspicion, are critical in minimizing the potentially severe complications of retained a foreign body.

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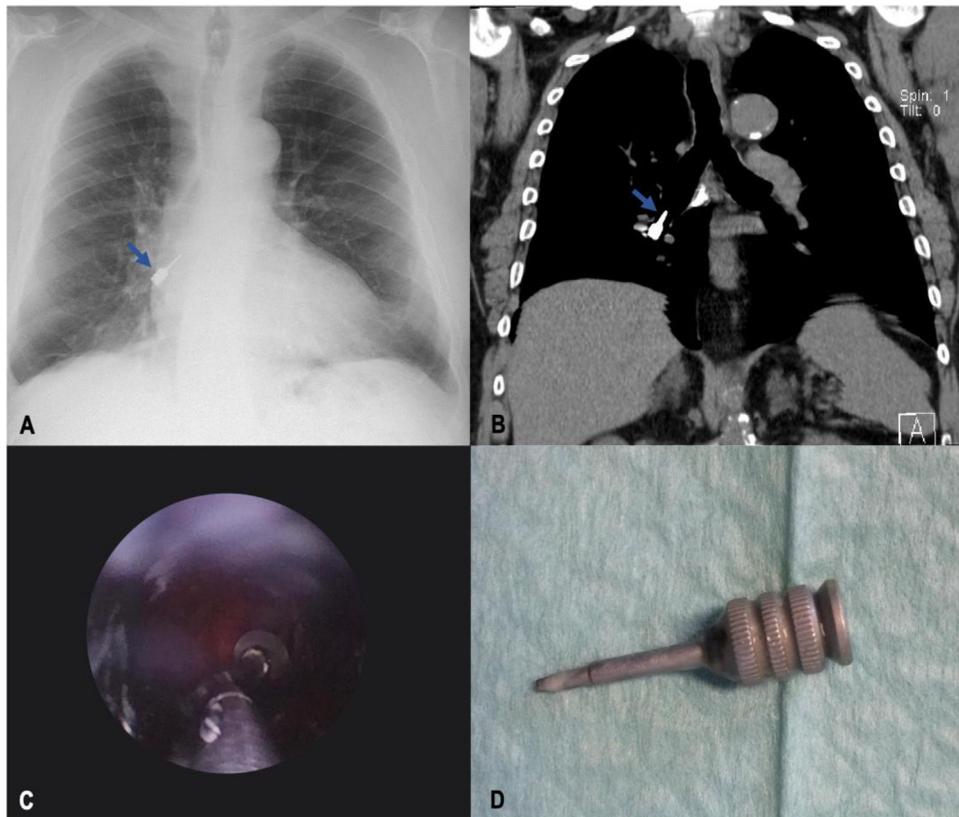


Fig. 1 A - Posteroanterior chest radiography showed a right lower retrocardiac radiopaque foreign body (blue arrow). B - Chest computed tomography scan revealed a dental instrument foreign body in the distal portion of the intermediate bronchus, immediately prior to division into the right basal pyramid (blue arrow). C - Extraction of endobronchial metallic foreign body using rigid bronchoscopy (*Karl Storz® Universal Bronchoscope for Adults 10318BP, size 8,5 and Hopkins® Telescope 10320AA*) using grasping forceps (*Karl Storz® Forceps for Bronchoscopy 10370U*), under general anesthesia with manual jet ventilation. D - The extracted foreign body was compatible with dental implant screwdriver.

Patient's consent

Informed consent was obtained concerning the publication of this case report.

Conflicts of interest

The authors have no conflicts of interest to declare.

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