

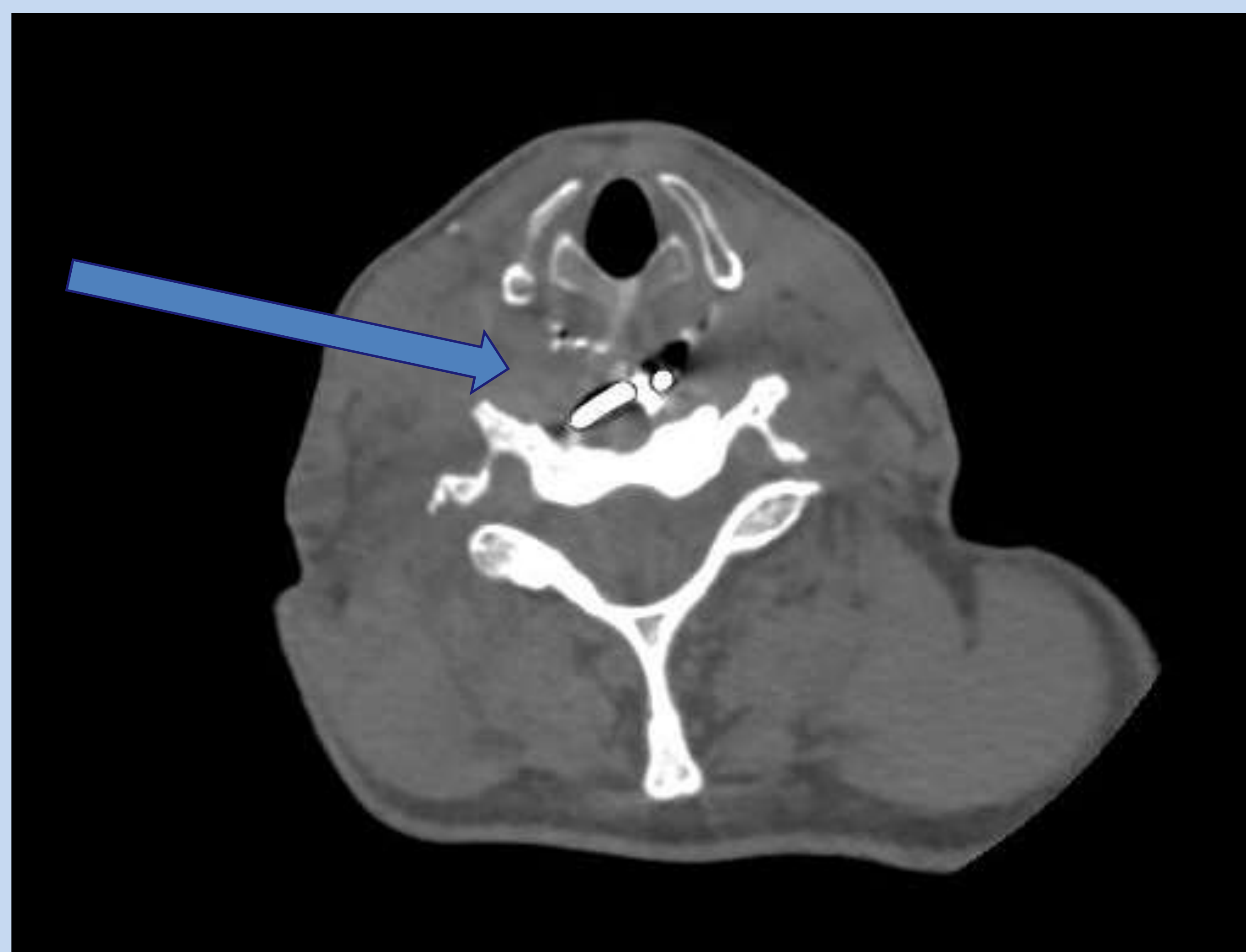
A choking screw. A rare cause of dysphagia

Juan M Fernández Núñez (1), Álvaro Martín Pérez (1), Concepción de Vera Guillen (1),
Rosario Peinado Clemens (1), Carlos Hernández Teixidó (1)

1.Servicio de Urgencias. Complejo Hospitalario Universitario de Badajoz, Servicio Extremeño de Salud, Badajoz, SPAIN

Keywords

dysphagia, screw, osteosynthesis material



51-year-old woman with a history of cervical fracture after trauma, 17 years ago, who required placement of osteosynthesis material after anterior approach (titanium plate).

For **2 years** she had been presenting **dysphagia to solids and liquids** with the sensation of a **foreign esophageal body**, which has increased in the last few weeks and forces her to eat slowly and in small quantities.

Consultation **because after a nocturnal cough, he expels a titanium screw through the mouth.**

After that, the clinical dysphagia and the sensation of foreign body disappeared.

While the anterior cervical approach is a safe and simple technique, it is not without complications. Dysphagia is relatively common in this type of surgery (up to 30%), but inherent in the procedure, and resolves spontaneously. Extrusion of the osteosynthesis material occurs in a few cases (<4.5%). However, the fact that both occur simultaneously and give rise to a "blind esophageal fistula with migration of this material" is extremely rare. Our case was resolved spontaneously leaving the patient with enteral nutrition and intravenous antibiotic treatment.

Why this image is clinically or educationally relevant?

Although the anterior cervical surgical approach is becoming safer, it is not free of complications. Attention should be paid to the dysphagia that does not disappear within a few months of surgery, since it may be a major problem, such as an esophageal fistula secondary to the extrusion of the osteosynthesis material.

