

## Foreign body aspiration: this time a chicken vertebra

Sedat Ziyade · Omer Soysal · Osman Cemil Akdemir ·  
Sacit Icten · Murat Ugurlucan

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A 24-year-old female patient presented to the clinic with severe cough and dyspnea. The symptoms started while she was having dinner, right after she loughed when still food was in her mouth. Her medical history was clear. There was wheezing and rhales at the left hemithorax, otherwise the physical examination was normal. Plain chest X-ray was normal. Laryngoscopy and oesophagoscopy did not reveal

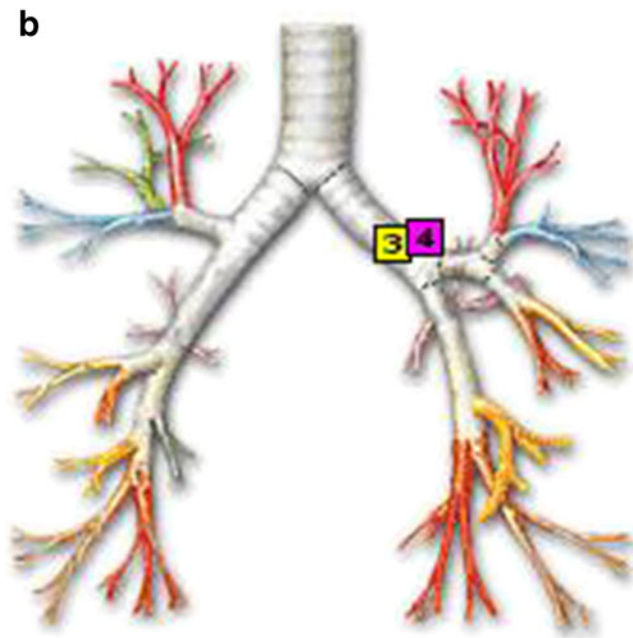
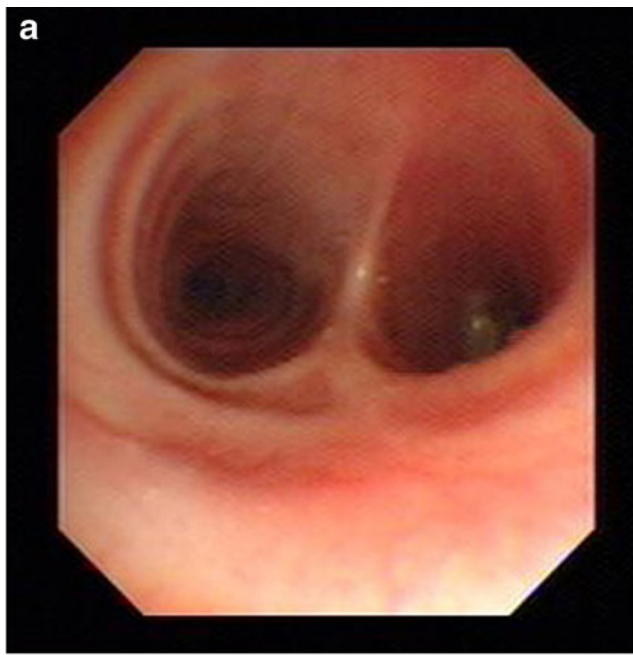
any pathologies. There was an abnormal cream coloured mass 1–2 cm beyond the orifice of the left bronchial system on fiberoptic bronchoscopy (Fig. 1a,b). Under general anesthesia, the patient underwent rigid bronchoscopy and the foreign body was extracted (Fig. 2a,b). This time, it was a chicken vertebra. Her symptoms relieved immediately and she was discharged from the hospital on the same day.

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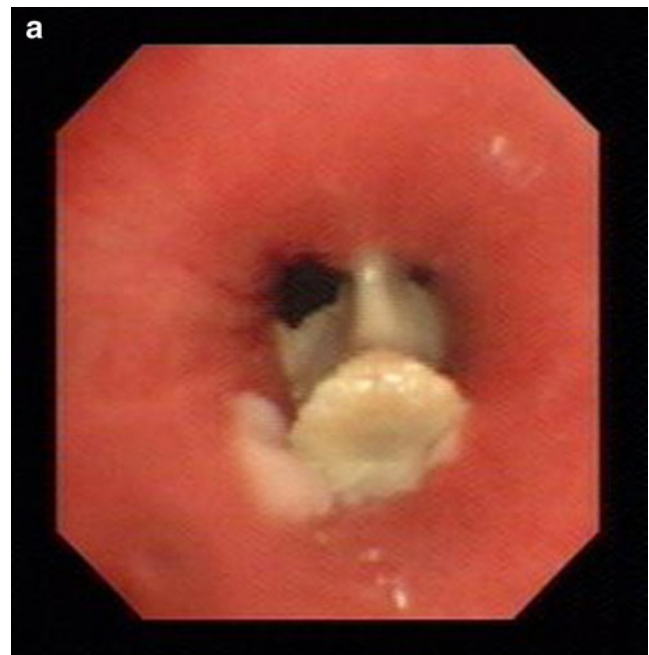
S. Ziyade (✉) · O. Soysal · O. C. Akdemir  
Department of Thoracic Surgery,  
Bezmi Alem Foundation University,  
Capa, Fatih/Istanbul, Turkey  
e-mail: drsz76@yahoo.com

S. Icten  
Department of Chest Diseases,  
Bezmi Alem Foundation University,  
Istanbul, Turkey

M. Ugurlucan  
Cardiovascular Surgery Clinic, Duzce Ataturk State Hospital,  
Duzce, Turkey  
e-mail: muratugurlucan@yahoo.com



**Fig. 1** **a** Fiberoptic bronchoscopy showing a cream coloured mass 1–2 cm beyond the orifice of the left bronchial system. **b** Indication of position of the foreign body on the diagram of bronchial tree



**Fig. 2** **a** Appearance of the mass in the left main bronchus by rigid bronchoscopy. **b** This time it was a chicken vertebra that is aspirated and leading to the symptoms