

Clinical Course And Outcomes Following Dental Foreign Body Ingestion: University of Illinois Adverse Events And Need For Endoscopy





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INTRODUCTION

- Foreign body ingestion during dental procedures is a rare complication that often requires medical evaluation and consideration for object extraction.
- Data in existing literature is scarce on patient outcomes and need for endoscopy after dental foreign body ingestion (DFBI).
- Patients often present with limited available medical information, making them difficult to treat.
- Given the uncommon presentation of DFBI, more information would aid gastroenterologists and hospital inpatient teams to help guide treatment plans.
- We aim to better define patient clinical course after DFBI and identify factors that may influence outcomes.

METHODS

Retrospective review of DFBI cases at a tertiary care center between 2015 and 2021.

Exclusion criteria: age <18 years old



Data collection

Electronic medical record review

Patient information, clinical course, imaging, interventions, and timeline

RESULTS Unknown **Blunt (11)** Sharp (9) Sharpness P-value (5)**OBJECT CHARACTERISTICS Object Length (mm)** unknown 3 (50%) 3 (50%) 0 2 (20%) 4 (40%) 4 (40%) <10 4 (44%) >10 4 (44%) 1 (11%) Object Width (mm) unknown 5 (38%) 5 (38%) 3 (23%) 2 (33%) <10 0% 4 (66%) 4 (66%) 2 (33%) 0 >10 **CLINICAL COURSE** Admitted (8) 3 (37.5%) 2 (25%) 3 (37.5%) 0.436 X-ray (24) 9 (37.5%) 10 (41.6%) 5 (20.8%) CT Scan (3) 2 (66.6%) 1 (33.3%) 0 0.413 **Specialty Consult** 4 (40%) 2 (20%) 0.202 4 (40%) (10)**Object Removed (3)** 2 (66.6%) 1 (33.3%) 0 0.413 **Endoscopy (4)** 2 (50%) 1 (25%) 1 (25%) 0.413 **Complications**

Table 1. Clinical course of DFBI based on object sharpness and object characteristics

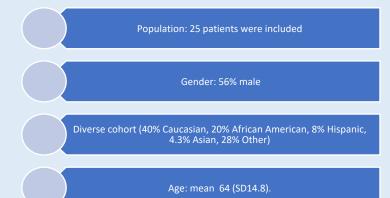


Figure 1: Cohort characteristics

DISCUSSION

- This study examines a rare cohort of patients who experienced DFBI and provides better understanding of their clinical course to help guide care decisions.
- Our findings highlight that DFBI has mostly a benign clinical course and can likely be managed conservatively if the object is distal to the esophagus.
- While a number of DFBs are sharp, even those that were not retrieved passed uneventfully and without complications, likely due to their small size.
- No specific patient/object characteristics were associated with need for hospital admission, endoscopic intervention, or increased rate of adverse events.