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## Cast the bait in human fishing: an expected esophageal foreign body

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Dear Editor,

An 82-year-old woman with a medical history of dementia was admitted to the emergency department with a line under tension by lead weights through her mouth, suspecting inadvertent swallowing of a fishhook. The chest X-ray was normal. An emergent endoscopy revealed the hook imprisoned in the middle esophagus (Fig. 1A). The sharpened end of the hook was carefully detached into the esophageal lumen using a rat tooth forceps and safely removed with an esophageal overtube (Fig. 1B-E). The esophageal defect at the impaction site was closed with the placement of two 11-mm through-the-scope metal clips (Fig. 1F), without intercurrents.

### DISCUSSION:

Ingestion of foreign bodies is relatively rare in adults and typically pass without intervention. Their extraction is a therapeutic challenge dependent on the type and location of the object, the time since ingestion, and the probability of associated complications, such as obstruction or perforation. Endoscopic management is the first

choice in the treatment of esophageal foreign bodies as a safe, effective, and minimally invasive technique, as it allows to maintain control of the object during extraction and minimize the risk of additional damage [1,2].

This case report represents a successful retrieval of an unusual foreign body specially designed in a sharped shape to be ingested by fish during fishing with an esophageal overtube avoiding surgery with significant morbidity and mortality.

#### References:

1. Ikenberry SO, Jue TL, Anderson MA, et al. Management of ingested foreign bodies and food impactions. *Gastrointest Endosc.* 2011 Jun;73(6):1085-91.
2. Smith MT, Wong RK. Esophageal foreign bodies: types and techniques for removal. *Curr Treat Options Gastroenterol.* 2006 Feb;9(1):75-84.

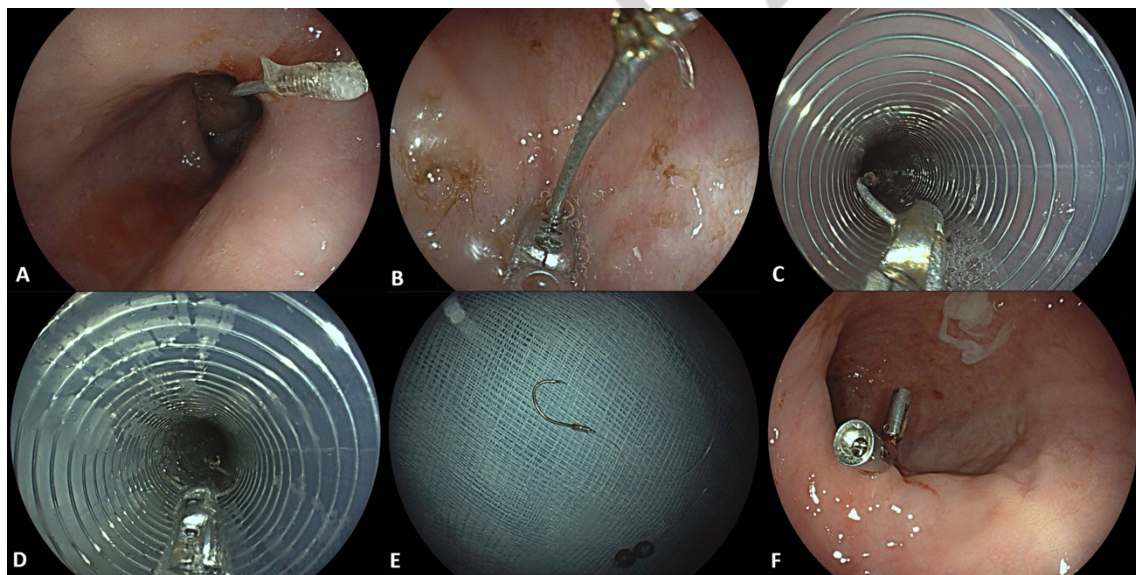


Fig. 1. (A) Fishhook imprisoned in the esophagus (B-E) Mobilization and removal of the hook using a rat tooth forceps and an esophageal overtube (F) Impaction site closure with two 11-mm through-the-scope metal clips

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