

Injection port aids linear foreign body removal in a cat

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DESCRIPTION

A 20-month-old domestic shorthair cat presented with a four-day history of vomiting. Right and left lateral abdominal radiographs showed there to be signs of mechanical obstruction: plication in combination with multiple loops of gas filled small intestine (Fig 1). Orthogonal abdominal radiography would be viewed as mandatory in a case such as this. No foreign body was palpable. These radiographic and clinical changes were consistent with

those described as occurring in feline gastrointestinal linear foreign bodies (Bebchuk 2002).

At induction of anaesthesia a thread was found to be wrapped around and also embedded into the underside of the tongue. Intubation was not possible before cutting thread due to caudal traction of the tongue.

Exploratory coeliotomy revealed plication of the small intestine, with a clump of thread material located within the mid-jejunum. The thread was removed in an aboral-oral direction, with the initial

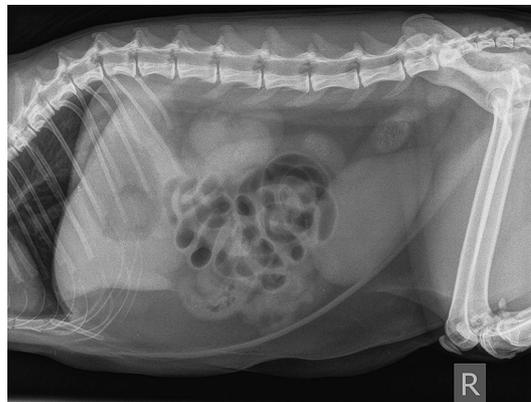


FIG 1: Right lateral abdominal radiograph shows prominent clumping of the small intestine and increased luminal gas.

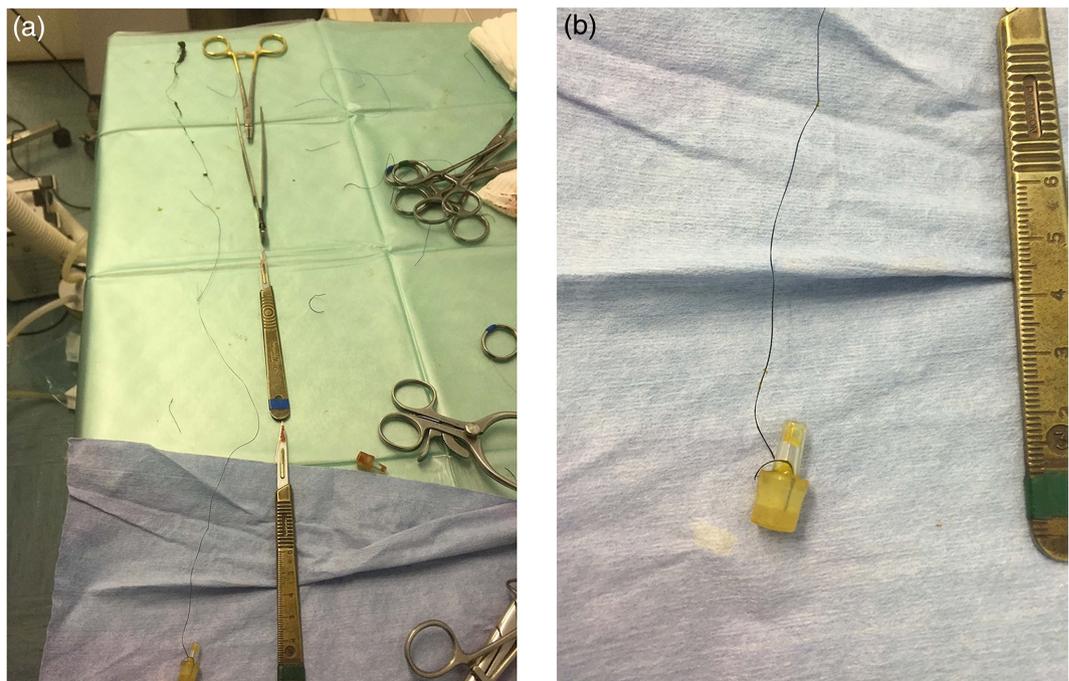


FIG 2: (a) The thread removed was two stranded and removed in four separate sections approximately 50 cm in total length which included the clumped aboral end portion. (b) The dual length of thread was attached to injection port using the plastic-silicone friction interface of the injection port.



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enterotomy revealing two sections of thread: both believed to extend as far as the tongue. The aboral section of thread was removed, while a sterile injection port (Male luer cap and injectable membrane; Vygon UK) was attached to the protruding oral section using the plastic-silicone friction interface of the injection port. This device was then passed into the intestine, and the enterotomy site routinely closed. The injection port was gently milked along the intestine before the same procedure being repeated at a further enterotomy and also one gastrotomy. The device enabled the surgeon to be aware of the location of the thread throughout the procedure, ease its passage through the pylorus and prevented loss of the position of either of the lengths of thread. The total length of thread removed with the assistance of the injection port was 50 cm (Fig 2A,B).

Feline linear foreign bodies are associated with a higher mortality rate than discrete foreign bodies. Reducing the number of

gastrointestinal incisions and surgical time are both described as factors which would likely improve surgical survival rate (Hayes 2009).

This case illustrates how a sterile discrete silicon device can aid the surgeon by reducing surgical time and the number of gastrointestinal incisions. Its use could be considered in assisting in other similar cases.

Competing interests None declared.

Provenance and peer review Not commissioned; externally peer reviewed.

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