

## FORGOTTEN GRASS ASPIRATION DURING A CHILDHOOD GAME - COMPLICATIONS IN ADULTHOOD

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## **Objective:**

Background: Endobronchial foreign body is a rare but potentially life-threatening diagnosis. If not recognized and treated promptly, it can cause recurrent pneumonia, bronchiectasis, recurrent haemoptysis and other complications. Here we present a case of a bizarre foreign body found in a patient with a history of recurrent pneumonia.

Case report: A 19-year-old male with a history of recurrent pneumonia and no other comorbidities was admitted to our tertiary teaching hospital for further diagnostic evaluation after a foreign body with a metallic appearance and empyema were revealed on a chest CT scan in another institution. Flexible bronchoscopy discovered a branched black foreign body covered in pus in the lateral segment of the right lower lobe (RB9). Extraction with forceps was attempted but the foreign body disintegrated so it

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was only partially removed. Particles of the foreign body were immediately recognized by the patient and identified as a grass known as wall barley (*Hordeum murinum*). He remembered he accidentally inhaled it during a game in his childhood but did not consider that information significant. With a tendency of complete removal, a combined rigid and flexible bronchoscopy was performed under general anaesthesia. Parts of the grass were repeatedly extracted with standard biopsy forceps and rat tooth grasping forceps until completely removed. A follow-up CT scan described cystically dilated bronchi in the RB9 segment and no remaining foreign body.

Conclusion: Even if not obvious from patient history, endobronchial foreign body should be considered as a possible differential diagnosis of recurrent pneumonia. Mineralization of organic material trapped in the airway for a prolonged period of time can lead to unusual appearances on conventional chest films and CT scans. Timely recognition of foreign body aspiration and accessibility of rigid bronchoscopy can reduce long-term complications such as recurrent pneumonia and bronchiectasis.