

Foreign body impaction aided by thumb-sucking in the palate of an infant.

Adeyemo WL.

J Craniofac Surg. 2012 Jul;23(4):1227-8

To the Editor:

Having read a recent paper published in J Craniofac Surg entitled “unusual foreign body impaction in the palate: plastic screw cap,”¹ I am encouraged to share a similar experience I had with a 16-month-old girl who was referred to a private hospital setting in Lagos, Nigeria for a foreign body impaction in the palate. The mother claimed she noticed a white object in her child’s palate four days before presentation. She did not know what the object was, but feared that it might a growth, and this made her visibly worried. On examination, the patient was a fit and healthy female infant who was not in any obvious distress. Attempts were made thrice to examine the child’s mouth, but she was very uncooperative. However, a round white object was visualized at the center of the palate. A decision was made to examine and extract the object under general anaesthesia.

Under gaseous and intravenous anaesthesia, the child’s mouth was fully open with a mouth gag. A whitish flat plastic object firmly attached to the center of the palate was seen (Fig. 1). The object (1cm x 1cm) was dislodged from the center of the palate (Fig. 2). An area of inflamed tissue around the edge of the object was exposed (Fig. 3). The child was discharged home the same day after full recovery from general anaesthesia.

The child was seen thumb-sucking in the clinic on two different occasions. The mother also gave a history of habitual thumb-sucking by the child.

Foreign body impaction in the palate of a child is relatively common.²⁻⁴ The tendency of small children to put objects into their mouths is the primary reason why hard palate foreign bodies are most common in this age group. Objects are more prone to adhere to the hard palate because of the anatomical differences in the pediatric palate.²⁻⁴ The natural position of the tongue, thumb sucking, soothers and feeding patterns further aid in facilitating the adherence of a foreign body to the roof of the oral cavity by producing a constant force on the foreign body up against the palate or even producing a partial vacuum at the foreign body – palate interface.³ After some time, the mucosa becomes irritated and inflamed around the periphery of the foreign body and seals it to the palate.^{3,4} In the present case, the shape of the palate, the dimension and size of the object and most importantly the thumb-sucking effect may have contributed to the adherence of the object to the palate.

References

1. Calis M, Konas E, Ozgur F. Unusual foreign body impaction in the palate: Plastic screw cap. *J Craniofac Surg* 2011;22:2430
2. Al-Muharraqi MA. Unusual foreign object in the palate of an infant-more fingernails. *J Oral Maxillofac Surg* 2010;68:1701-1702.
3. de Jong AL, Moola F, Kramer D, Forte V. Foreign body in the palate. *Int J Pediatr Otorhinolaryngol* 1998;43:27-31.
4. Unusual presentation of a foreign body in the palate. *Indian J Plast Surg* 2008;41:96-97

Legend to figures

Figure 1: The foreign body attached to the centre of the palate in a 16-month-old girl (under general anaesthesia)

Figure 2: A whitish round plastic extracted from the palate

Figure 3: An inflamed tissue around the edge of the foreign body exposed after removal