

MIGRATED FOREIGN BODY INTO URINARY BLADDER

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INTRODUCTION

Variety of foreign bodies have been extracted from urinary bladder. Foreign bodies reach urinary bladder mainly by three ways.¹

- a. Self insertion per urethra for sexual gratification or attempted abortion^{2,3} psychiatric patients, small children or those under effect of drugs.
- b. Through iatrogenic means during bladder drainage procedure, bladder surgery or surgery on organs adjacent to bladder.
- c. Migration from adjacent organs like uterus, rectum, vagina or by penetrating trauma.⁴

Patients with foreign bodies may either present acutely with symptoms or present late with an interval from months to years.

We present a case of foreign body removed from bladder after seven years of receiving penetrating abdominal injuries.

CASE REPORT

A 25 years old constable in Khyber Rifles presented with history of difficulty in passing urine for a period of two months, burning micturition and haematuria for fifteen days. Seven years back he had received blast injuries in a combat at Pak-Afghan border and had sustained multiple injuries including severe abdominal injuries. Laparotomy had been performed at Combined Military Hospital Peshawar and had some metallic splinters were removed.

He had recovered and had no problem later on.

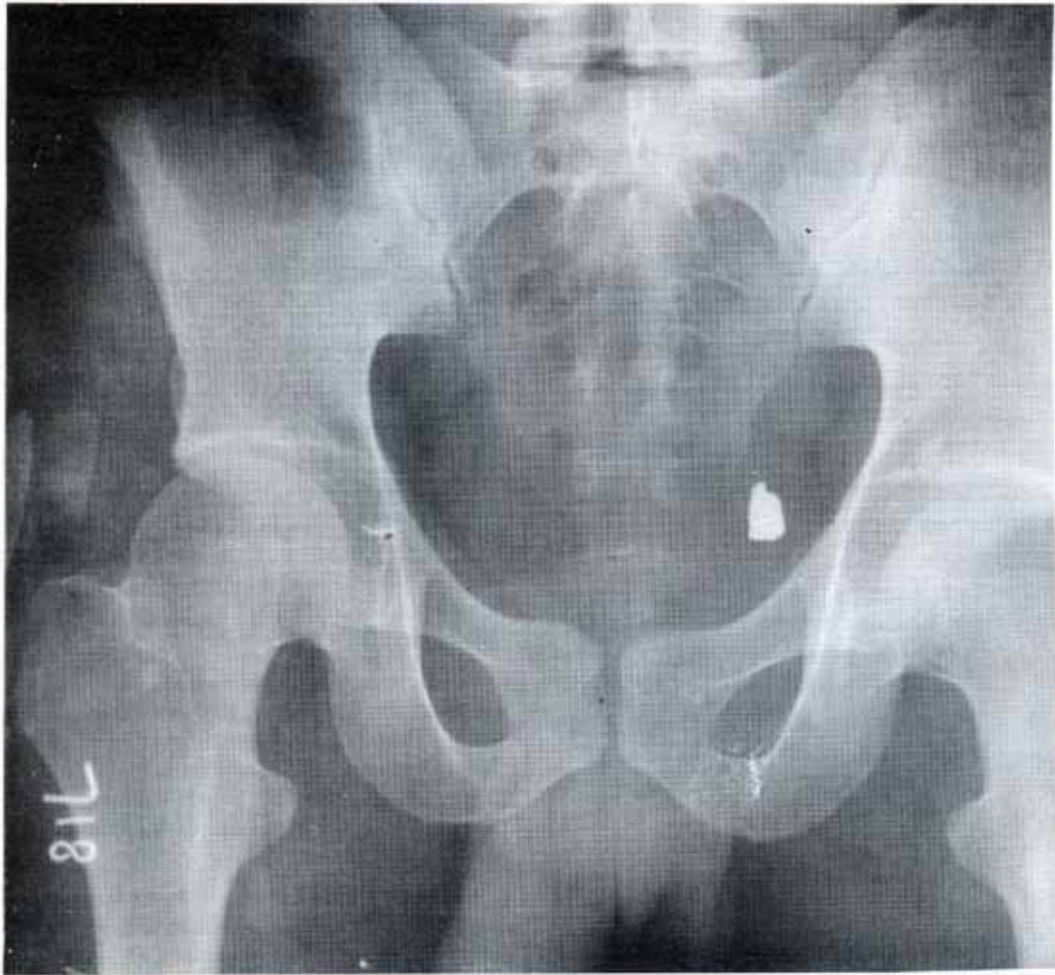
Abdominal examination showed old operation scar (Right Paramedian) extending from costal margin down to pubic region. On palpation there was slight tenderness in right iliac fossa and hypogastrium.

Microscopic examination of urine showed pus cells 3-4/ HPF and RBC 0-2/ HPF. Blood urea, serum creatinine and leukocyte count were within normal limits. X-ray KUB showed a rounded metallic foreign body, 1.5 cm in diameter in the urinary bladder area.

Urinary bladder was opened through a suprapubic incision and foreign body was removed. Patient had uneventful recovery and was discharged on 5th post operative day.

DISCUSSION

The commonest foreign body in urinary bladder's fragment of a catheter balloon⁶. Foreign bodies in bladder either self introduced per urethra or migrated or introduced through a penetrating wound may be long lasting and may be ignored by the patient. Such foreign bodies may become a nidus for stone formation^{6,7}. These patients usually present with recurrent urinary tract infection. In this case, abdominal injury was seven years old and urinary symptoms were of two months duration. With such a long history of silent foreign body we concluded that the foreign body



had migrated to urinary bladder from peritoneal cavity.

A foreign body to remain symptomless, has to be very smooth itself or coated with phosphate or oxalate crystals. In this case the foreign body was irregular with sharp margins, not coated with any crystals. We postulate that foreign bodies are covered with of phosphate coating only in people who are already suffering from crystalluria. As in this case there was no crystalluria the foreign body stayed for 2 months in bladder without any calculus formation.

REFERENCES

1. Abdullah MM. Foreign bodies in bladder Br. J of urology 1990; 65: 420.
2. Eckford SD, Persad RA, Brewster SF, Gingell JC. Intravesical foreign bodies five years review. Br. J of urology 1992; 69: 41.
3. Kelly SB, Young MR. Blu-Tack in the bladder Br. J urology 1988; 61: 94.
4. Kural AR, Comel E, Erozcenci A, Oner A. Intravesical migration of a rectal foreign body Br. J of urology 1987; 60: 79.
5. Walmsley BH. Removal of foreign bodies from female bladder Br. J of urology 1987; 59: 196.
6. Baily, Mann, R.C.G Russell and Love. Short practice of Surgery, 22nd ed. 1995 by Chapman and Hall Elbs Ed. p. 955.
7. Blandy, John, P. Lecture notes on Urology. 3rd ed. 1982. p. 97.