Dental Crown Aspiration

Siavash Kooranifar; Samira Nakhaei*
Iran University of Medical Sciences.

*Corresponding Author(s): Samira Nakhaei
Iran University of Medical Sciences.
Email: samira.nakhaie@gmail.com

Clinical image description

The patient is a 45 year-old female who works as a hospital personnel (secretary) with no significant medical history. She had sudden cardiac arrest while she was at work. Chest compression was commenced immediately. She underwent endotracheal intubation and electrical defibrillation was successful. After 3 days she was extubated and admitted to intensive care unit, but she had dry cough. Computed tomography of chest revealed a radiopaque foreign body in the right lower lobe bronchus and bilateral alveolar infiltration. Based on the diagnosis of long QT syndrome, implantable cardioverter defibrillator insertion was indicated for her. During coronary angiography a radiopaque foreign body was considered as a dental prosthesis. The patient was referred to the flexible bronchoscopy department and the temporary dental crown was retrieved by using forceps. Outside the dental office, dental aspiration can also occur in the context of seizures, trauma or, rarely, after endotracheal intubation.

Coronary angiogram. Radiopaque dental prosthesis are seen.

Flexible bronchoscopy revealed dental prosthesis