

# Extrusion of fish bone through the neck

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THE FOLLOWING CASE is reported as it is deemed very unusual.

## History

On 22-7-71 at about 12 noon, I saw a 70-year-old Chinese male, Yeoh Gan, who pointed to his neck saying that a piece of fish bone was coming out from there. Rather puzzled, I asked him why he knew it was a fish bone. He said that he had swallowed a piece of fish bone during a meal about 2½ months ago. After suffering for a few days from dysphagia, he was all right and forgot all about the incident. On the day of consultation, when he got up in the morning, he became conscious of something protruding under the skin in the neck and he was sure it was the fish bone that he had swallowed that was pushing its way out.

## Examination

He appeared to be in good general condition. On the left side of the neck at a point about half an inch above the clavicle and two inches lateral to the midline, the skin was elevated to a height of about 3/16 of an inch. Light pressure on the elevated spot gave the feeling that the skin was being pushed out by a sharp-pointed object. There were no signs of inflammation around the spot. A

picture of the patient showing the elevated spot in the neck was taken. (Picture A).

## Operation

Under local anaesthetic, a small incision was made in the spot. The sharp point of a whitish fishbone was found presenting in the subcutaneous tissue. It was extracted with ease.

## The Fish Bone

It has a very sharp point at one end. The other end is blunt, measuring about 1/10 inch in width. The length of the bone is about ¾ of an inch. The two sides of the bone are lined by a row of closely set fine barbs pointing away from the sharp-pointed end. This kind of bone with side barbs comes from certain ray-fish. A picture of the bone under magnification was taken. (Picture B).

## Discussion

It is obvious that the happy ending of the episode of swallowing the fish bone in this case was due to the bone having a sharp point which enabled it to penetrate the soft tissues of the neck starting from the upper part of the oesophagus and those side barbs pointing away from the sharp end which



Fig. A

ensured that the muscular contractions from deglutition and neck movements would push the bone onward only in one direction. The side barbs made it impossible for the bone to move backward away from sharp end. Thus the bone was progressively pushed towards the skin until the sharp end had reached the subcutaneous tissues. Then and there the outward movement of the bone was stopped because the skin was too tough for the sharp end of the bone to pierce. Otherwise, the bone would



Fig. B

have extruded itself completely without any outside help.

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