LETTER TO THE EDITOR



SUZY forcepsTM for the removal of an esophageal coin from a child

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To the Editor:

We report the successful removal of an esophageal coin from a 3-year-old boy using the McGRATH MACTM (MGM) and SUZY forcepsTM (SF) (Covidien Japan).

The patient accidentally ingested a coin (diameter 23 mm and thickness 1.5 mm), which we confirmed was located in the proximal esophagus 15 cm from the incisors, just behind the larynx, via an oral fiberscope under general anesthesia. Since there was inadequate working space for oral fiberscopic examination, we decided to use a smaller nasal fiberscope to allow for better visualization. Under nasal fiberscopic observation, we tried to remove the coin using a direct laryngoscope (Macintosh #2) and Magill forceps, but it was impossible to insert the tip of the forceps into the esophagus. We then switched to a MGM (blade #2) and SF, which allowed us to see the tip of the SF in the visual field of the fiberscope, thereby allowing us to remove the coin successfully.

The combination of MGM and SF proved successful because the shape of the SF mimics the shape of the MGM blade [1] (see Electronic Supplementary Material Fig. 1). Although we did not observe the coin using the MGM blade, we were able to visualize the coin with the nasal fiberscope, thereby allowing us to grip the coin using the SF.

Acknowledgments We thank the patient and his parents for allowing us to report this case. Written consent was obtained. As such, this manuscript requires no further ethical approval.

Conflict of interest There are no conflicts of interest.

Reference

 Suzuki A, Tampo A, Kunisawa T, Henderson JJ. Use of a new curved forceps for McGrath MAC video laryngoscope to remove a foreign body causing airway obstruction. Saudi J Anaesth. 2013;7:360-1.

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