

Case Report

Rare cause of foreign body in urinary bladder

Sunil Gokhroo*

Associate professor and HOD Urology, RNT Medical College, Udaipur, Rajasthan, India

Received: 01 August 2020

Revised: 15 August 2020

Accepted: 17 August 2020

***Correspondence:**

Dr. Sunil Gokhroo,

E-mail: sunilgokhroo@gmail.com

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ABSTRACT

Foreign body in urinary bladder is not an uncommon entity. Mostly it happens due to iatrogenic reasons or for sexual gratification. Here we are reporting a common foreign body in urinary bladder with a rare cause which is not reported in literature earlier. A 50-year-old married man referred from village with history of inserting electric wire in urethra and X-ray pelvis showing coiled metallic foreign body in the bladder region. There was dysuria, burning and sometimes hematuria. All other investigations were normal. On examination his both groins and perianal region were involved with *Tinea cruris*. Patient told that he had intense itching which was not benefitted by skin treatment. He himself started doing some manipulation in urethra with a piece of wire to get some relief in itching. The metallic wire was removed by cystoscopy under spinal anaesthesia and C-arm guidance. Post-operative course was uneventful, and patient was sent to dermatologist for treatment of *Tinea cruris*. After 1 month there were no urinary symptoms and patient had improvement in *Tinea* symptoms. We recommend that whenever anyone comes across a case of foreign body in urinary bladder, detailed history should be taken, and local examination should be done to find any organic cause for the same and treated to prevent recurrence and stigma to the patient.

Keywords: Foreign body, Urinary bladder, *Tinea cruris*

INTRODUCTION

Foreign body in urinary bladder is not an uncommon entity. A variety of objects have been recovered from urinary bladder. Mostly it happens due to iatrogenic reasons or self-inflicted for sexual gratification.¹ Rarely it is found in mentally retarded people also. Sometimes these are diagnosed immediately, sometimes it presents little later on with supra pubic pain, dysuria and hematuria or years after stone formation. Mostly these can be managed endoscopically. Here we are reporting a common foreign body in urinary bladder with a rare cause which is not reported in literature earlier. Patient is a 50-year-old married man with *Tinea cruris*, which is an organic cause and can be treated easily. Therefore, detailed history and local examination is always required in these types of cases.

CASE REPORT

A 50-year-old married man, referred from primary health center with complaint of dysuria for 15 days, history of inserting approximately 1 meter long electric wire in penis and X-ray pelvis showing coiled metallic foreign body in bladder and prostatic region. On taking detailed history there was no obvious psychological cause. Patient told that he was having intense itching in both groins and perineal region for which he took local treatment at village. He was not benefitted much with the skin treatment and sometimes he inserted wire inside the urethra which alleviated his symptoms for some time. So, he kept doing this and one day it went completely inside, and he could not retrieve it. He could tolerate this wire initially, so did not told anyone for the incidence but after 8-10 days there was dysuria, burning and sometimes bleeding in urine, so he consulted

local doctor and referred to us. All other investigations were normal. On examination his both groins and perianal region was involved with *Tinea cruris* which was confirmed by dermatologist.

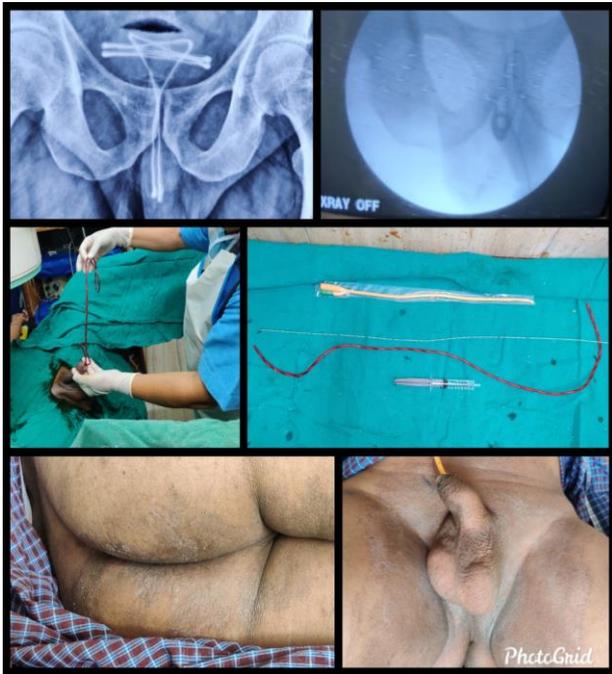


Figure 1: Preoperative X-ray, per operative C-arm image, per operative external image, specimen.

The metallic wire was very much coiled and there was fear of getting it knotted while removing it, therefore we took the consent for endoscopic as well as open surgical intervention. We did the cystoscopy under spinal anaesthesia and C-arm guidance. The tip of one side of wire was seen in prostatic urethra, it was grasped with flexible forceps and pulled slowly along with whole cystoscope and continuous fluoroscopy. Once tip was taken out at external urethral meatus, it was grasped with hand and pulled easily. Again, cysto-urethroscopy was done. There was no significant trauma, a catheter was inserted. Post-operative was uneventful, catheter was removed on post-operative day 2 and patient was sent to dermatologist for treatment of *Tinea cruris*. After 1 month there were no urinary symptoms and patient had improvement in *Tinea* symptoms.

DISCUSSION

Foreign body in urinary bladder is not an uncommon entity.² Mostly it happens due to iatrogenic reasons or self-inserted, for sexual gratification.³ Numerous iatrogenic objects like Foley's catheter tip, jelly caps, gauge, migrated intrauterine contraceptive device, broken endoscopic instruments, ureteral double J stents, needle etc. have been retrieved from urinary bladder.⁴ Mahadevappa et al discussed in detail the various psychological factors for self-inflicting foreign bodies in lower genitourinary tract in males.¹ Sometimes it is

inserted for sadistic abuse or by mentally retarded patients also.⁵ Most patients present late due to shame and social stigma to accept the insertion of foreign body. When presented within few days, most of these cases can be managed endoscopically. Sometimes if stone formation occurred after long duration, open surgery may be required.⁶ Variety of other objects recovered from urinary bladder are pen, pencil, wire, tubes, hair pins, safety pins, thermometer, bullets, batteries, screws, pessaries, ribbon, plastic toy, eraser, and many more.⁷ Here we report a case of electric wire in the urinary bladder, which is a common object, but on taking detailed history we found that the reason for inserting the wire in urethra was intense itching in groin, perineum and perianal region.⁸ This was an unusual reported cause for self-infliction of foreign body in lower genitourinary tract. We could not find any organic or local cause mentioned in literature for foreign body in urinary bladder, so this case is reported. So, there should be mandatory detailed history and thorough physical examination of the patient to find out the exact cause and prevent recurrence. This will also prevent any social/psychological stigma to the patient.

CONCLUSION

We recommend that whenever anyone comes across as a case of foreign body in Urinary bladder, detailed history should be taken, and thorough local examination should be done to find any organic cause for the same and treated to prevent recurrence and stigma to the patient.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: Not required

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Cite this article as: Gokhroo S. Rare cause of foreign body in urinary bladder. *Int Surg J* 2020;7:3166-8.