

The condition needs to be differentiated from Basal ganglia germinoma, Sturge Weber syndrome, Linear nevus syndrome, Fishman syndrome, Silver-Russell syndrome and Rasmussen encephalitis(5,6).

A possible etiological relation between cerebral atrophy and seizures has been reported in two different studies from India(7,8). Prognosis is better if hemiparesis occurs after the age of 2 yrs and in absence of prolonged or recurrent seizures. Children with intractable disabling seizures and hemiplegia are the potential candidates for hemispherectomy with a success rate of 85% in carefully selected cases.

*Contributors:* NPN diagnosed this case, supervised the management and drafted the manuscript; he will act as guarantor of the paper. BN and RK were involved in patient management and review of literature.

*Funding:* None.

*Competing interests:* None stated.

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## Multiple Foreign Bodies in a Neonate

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#### ABSTRACT

*We report a rare instance of nine foreign bodies in a neonate that included a coin, safety pin, screw, cotton piece, polythene piece, and four glass pieces. Of these, six foreign bodies were removed by esophagoscopy and endoscopy, two glass pieces were passed in feces and one could not be removed. The child died 5 days after admission.*

**Keywords:** *Esophagus, Foreign body, Gastrointestinal tract, Newborn.*

A 12 day-old female child having normal parents, presented with a complaint of recurrent vomiting, fever and respiratory distress for 11 days. During this period of 11 days she was treated by many pediatricians, with antibiotics and other supporting medicines. On admission, the general condition was poor and she was put on antibiotics and CPAP. Chest X-ray revealed three metallic foreign bodies (a coin, safety pin, and screw) in the upper, mid-esophagus

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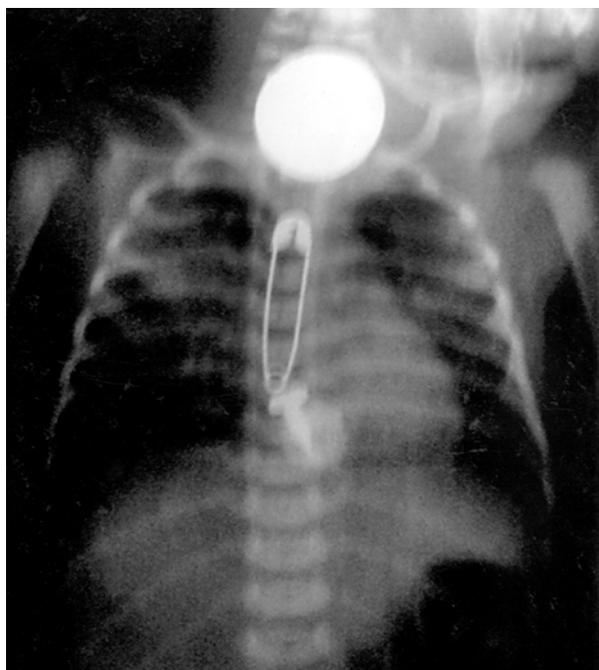


FIG. 1 X-ray chest PA view showing multiple foreign bodies (rounded shadow, safety pin, screw, cotton piece).

and near the cardiac end of esophagus (**Fig. 1**). The patient was then referred to ENT Department and five foreign bodies (coin, safety pin, screw, cotton piece, polythene piece) (**Fig. 2**) were removed by rigid esophagoscopy. A repeat chest X-ray after the procedure suggested some opaque shadows at cardiac end of esophagus and stomach. A gastroenterologist was consulted who could remove one glass piece from stomach by fiberoptic endoscopy. One sharp edged glass foreign body could not be removed because of the risk of esophageal tear. Two small glass pieces were recovered in feces. Thus a total of nine foreign bodies were identified in the gastrointestinal tract of this new born female child, of which 8 were removed/expelled. Condition of the child deteriorated and she died after five days of admission.

In spite of repeated questioning, the attendants and relatives vehemently denied any act of deliberate introduction of foreign bodies in the mouth of the newborn. However, the police has registered a case of murder and started investigations.

## DISCUSSION

Foreign bodies in the esophagus are mostly accidental

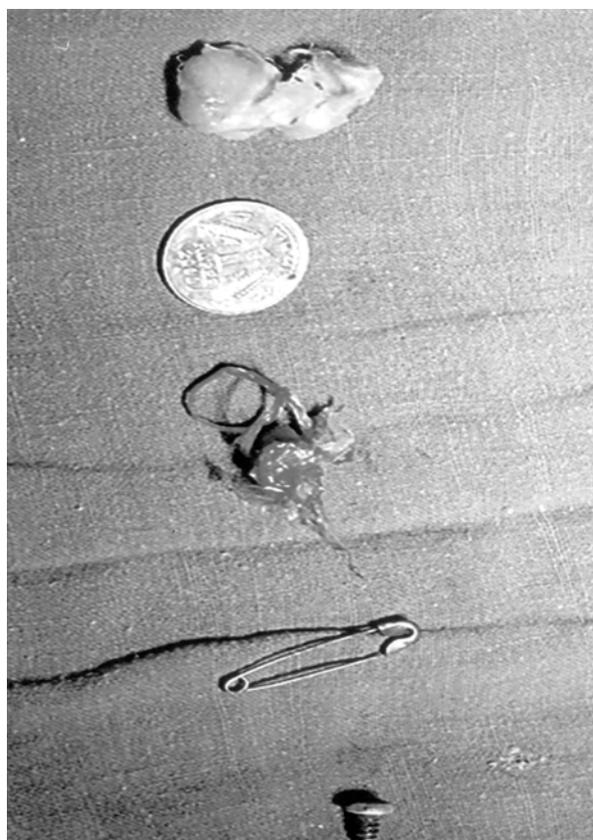


FIG. 2 Photograph of cotton piece, coin, polythene piece, safety pin and screw removed from the esophagus and stomach by the help of endoscope.

and usually occur in older children and adults(1-3). Multiple foreign bodies in esophagus have been reported earlier(4,5), however, we did not come across any instance of esophageal foreign bodies in a 12 day old neonate.

Though we were not able to ascertain the cause, it appeared to be a homicidal act. Family members were not suffering from any psychiatric illness. A detailed medicolegal investigation is warranted in such cases.

*Contributors:* AM managed the case, kept records and wrote the paper. PPG and RKG help in collecting data, literature review and manuscript preparation.

*Funding:* None.

*Competing interests:* None stated.

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## Medicolegal Opinion

*The present case is a glaring example of increasing incidences of child abuse/neglect. The important information, which is missing in this case-report, is the birth order of the child. We are in the era of industrialization and globalization, where the value of money is increasing at the cost of humanity and human relations. The birth order of this child would have given the clue regarding the issues of unwanted child, gender inequality/discrimination and similar issues related with present social scenario, norms and structure.*

*The statement that family members were not suffering from any psychotic illness is difficult to accept and the authors should have clarified whether the evaluation was done by a qualified and competent psychiatrist.*

*The overall issue is that of the infringement of the 'Right to Life' guaranteed under article 21 of the*

*Constitution of India. It also involves the issues of living with dignity, gender inequality/discrimination and hence we may inform such incidents to Child Right Commission, women's right activists/organization, human right activists, Women and Child Development Department.*

*Finally, there is need to create awareness amongst Pediatricians, Obstetricians, General Physicians, Health workers (ICDS, School teachers etc.) so that early suspicion and diagnosis may help in saving the endangered life. Saving the girl child (more so when their sex ratio is rapidly declining) is important in our so-called cultured, highly educated and humanized society.*

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## Osteomyelitis due to BCG Vaccination

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### ABSTRACT

*A six month-old immunocompetent boy who received BCG at birth presented with multiple abscesses in left subaxillary region, and swelling and wound infection on the left arm. Radiographs revealed osteolytic lesion in the left humerus. A biopsy from the site revealed chronic*

*granulomatous lesion, positive for M. bovis on tissue culture. The lesion responded to antituberculous therapy and surgical treatment. There are no sequelae after 2 years of follow-up.*

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