The use of rigid bronchoscopy in foreign body aspiration

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Dear Editor,

Foreign body aspiration is a frequent and urgent medical condition, particularly in children and the elderly. In this context, rigid bronchoscopy has emerged as a preferred method for the safe and effective removal of foreign bodies from the airways.

Rigid bronchoscopy holds significant importance among bronchoscopy procedures due to its diagnostic and therapeutic capabilities. The main advantages of this method include the ability to remove large and variously shaped foreign bodies, providing adequate airway control, and managing bleeding effectively. Additionally, during rigid bronchoscopy, the operator can obtain a broader visual field and better evaluate changes in the airway.

In cases of foreign body aspiration, the rapid and effective intervention provided by rigid bronchoscopy plays a crucial role in reducing patient morbidity and mortality. Accurate diagnosis and prompt intervention are vital, especially in pediatric foreign body aspiration cases. Therefore, rigid bronchoscopy is considered the gold standard in the treatment of pediatric patients.

The success of the procedure is directly influenced by the presence of an experienced team and appropriate equipment. Hence, it is essential that healthcare institutions have sufficient equipment and training in this area. Furthermore, the teams must be knowledgeable and prepared to manage potential complications during bronchoscopy. Literature reviews support the efficacy and reliability of rigid bronchoscopy in foreign body aspiration. For example, Ghosh et al.^[1] highlighted the life-saving potential of rigid bronchoscopy in pediatric patients. Their study involving 138 children under 12 years of age demonstrated that, with the necessary expertise, trained anesthesia team, and a pediatric ICU, rigid bronchoscopy successfully managed the majority of tracheobronchial foreign body cases, with only two fatalities reported. Similarly, Sezer et al.^[2] emphasized the critical role of endoscopic methods, including rigid bronchoscopy, in the removal of foreign bodies from the respiratory system. They discussed the high success rates and early postoperative discharge of patients, underlining the importance of timely intervention to prevent severe morbidity and mortality. Özdemir et al.^[3] conducted a retrospective analysis of 337 children with suspected airway foreign body aspiration and highlighted the effectiveness of endoscope-assisted rigid bronchoscopy. They found that the use of a rigid endoscope during rigid bronchoscopy allowed for better visualization of distal bronchi and foreign bodies, particularly in children under the age of 3 years, improving the safety and success of the procedure. Additionally, Wadhera et al.^[4] assessed epidemiological data and the role of rigid bronchoscopy in 200 patients with suspected foreign body aspiration. They found that rigid bronchoscopy was a safe and effective tool for the management of tracheobronchial foreign bodies, particularly in pediatric patients, with the most common foreign body being peanuts





and the right main bronchus being the most common site of lodgement.

In conclusion, rigid bronchoscopy is a proven, effective, and reliable method for foreign body aspiration. Its correct and timely use improves the quality of life for patients and minimizes life-threatening risks. Therefore, it is crucial to promote the widespread use of rigid bronchoscopy in clinical practice and to educate healthcare professionals on this method.

Disclosures

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