A Case Report of Recurrent Foreign Body Sensation in Throat-Unusal Long Uvula

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Abstract
Recurrent foreign body sensation in throat is a distressing symptom for patients in routine ENT opd practice. Investigations of this patient with recurrent foreign body sensation can be simple or complex depending on the underlying aetiology. There are some unusual reasons for recurrent foreign body sensation, which need to be kept in mind when investigating the cause. A case of a unusual long uvula causing recurrent foreign body sensation through mechanical irritation in throat is reported.

Case Report
A 21 year old male patient was came to the ENT OPD of GRMC and JAH Gwalior with complaints of recurrent foreign body sensation in throat since the age of 10yr. This distressing usually ended in chronic cough with variable symptomatic relief. The coughing episodes were mainly observed during the daytime and occasionally precipitated by a semisolid or solid diet. There was no history of fever, breathlessness, evening rise of temperature, weight loss, trauma.
Apart from this distressing symptom, he was asymptomatic and thriving well. His growth was appropriate for his age. He was born by Normal Delivery with normal birth weight. His neonatal period was uneventful. He was fully immunised. The patient’s father is from chhatarpur district (MP) and former by occupation. There was no relevant family history as per patient.
Apart from a long uvula (fig 1), his routine otorhinolargological and head and neck clinical examination was completely normal.
Investigations
A full blood count, blood culture, nasal swab, chest radiograph, and oesophageal study were performed and were reported as normal. With the differential diagnosis of cough or gastro-oesophageal reflux, a series of investigations were carried out and reported as normal.
With a view to ruling out any anatomical problem or pharyngeal in coordination, a barium study was performed. This was also reported as normal but the radiologist commented on his elongated uvula, which was seen prominently on the film.

Treatment
Surgical option awaiting after patient consent and possible uvulectomy.

Discussion
The uvula is an appendage of soft palate and is formed by the fusion of the two halves of the soft palate. It is an important structure in producing a tight seal in the pharynx during speech and feeding. An elongated uvula can flop down and touch various structures in the upper airway including the posterior pharyngeal wall, base of tongue, epiglottis and sometimes to vocal cords. Irritation of these structures can lead to recurrent foreign body sensation followed by chronic cough. There are case reports of the uvula causing irritation of the epiglottis or vocal cords. There are case reports of children with chronic cough and long uvula. Uvulectomy led to relief from these symptoms. As in our case there was no significant family history but in Africa, especially in the Muslim community, uvulectomy is an ancient tradition and is common. There are various case reports and commentaries from the literature in 1970–80. Uvulectomies are normally performed by traditional healers with indifferent results.

This case report illustrates the importance of eliciting history and as the need for thorough examination for unusual signs, which can point towards the aetiology. Unusual cause must be kept in mind if the usual causes do not seem to solve the problem.

Conclusion
Main goals are to make aware of this under-recognized subset of patients with recurrent foreign body sensation followed by chronic cough who have an identifiable and treatable cause for their symptoms and to provide a simple and effective surgical solution to chronic cough in these patients.

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