수 있지만 경우에 따라 수술을 요하는 경우도 있고 사망례도 있다.

저자들은 1972년 1월 1일부터 1976년 3월 31일까지 4년 3개월동안 한강성심병원 이비인후과에 내원했던 식도 및 기도이물 환자 205레에 대한 통제적 고찰을 하여 다음과 같은 결과를 얻었다.

- 1) 총 205례중 식도이물이 200례(97.6%)로 대부분 이고 기도이물은 5례이었다.
- 2) 종류는 식도에서는 주화가 가장 많았고(90%), 기도에서는 콩, 땅콩, 빨래집개, 플라스틱조각, 옥수 수알 등이 있었다.
- 3) 이물의 부위는 식도의 제 1 협착부가 가장 많았다 (96.5%).
- 4) 남녀 발생빈도를 비교해보면 식도에서 1.4:1, 기도에서 3:2로 큰차이는 없었다.
- 5) 개재시간은 식도이물에서 3일 이내에 87%가 내원했고 기도이물에서는 1일 이내에 모두 내원했다.

13. 最近 本教室에서 經驗한 興味있는 氣管支異物에 對하여

慶北醫大

李養璿・池重敏・宋在權・金正道

報道 및 食道異物은 耳鼻咽喉科 領域에 있어서 중요한 위치를 차지하고 있으며 그에 對한 보고도 허다하다. 또한 그 종류도 여러가지로써 우리들 주위에 있는 모든 物件이 순간적인 不注意로 인하여 異物이 될 수 있으며 異物의 종류와 그 部位에 따라서는 直達競을 除外한 다른 理化學的 檢查로써는 誤診하는 수가 때로 있어 長期間 異物을 體內에 殘留케 하거나 심지어는 生命에 위협을 주는 일이 없지않아 耳鼻科臀의 注意를 확기시키는 疾患이다.

著者는 최근 13세 소아에서 氣管支粘膜의 色과 같은 pink color의 pencil cap이 氣管支內에 합입되어 흡사 異物이 氣管支輪과 같아 異物除去에 곤란을 야기시켰던 例를 경험하였기에 文獻的考察을 加하여 報告하는 바이다.

14. 기도 이물

대구동산기독병원

김선우 · 홍래복

기도 이물은 유아나 소아에서 특히 많으며 성문으로

들어갈 수 있는 크기라던 우리 주위에 있는 어떤 물체라도 이물이 될 수 있으며 따라서 기도 이물의 종류도다종 다양하다. 그리고 특수하게 생긴 이물의 개재부위가 다양해지는 것을 감안할 때 우리는 환자 치료에 있어서 획일적이고 동일하게 처리될 수 없음을 알 수 있다.

저자는 최근에 유아 및 소아에서 후두의 이물로 생 선뼈 1례, 기관지 부분에서 절린 피리 1례 및 기관 이 물로 철사 1례를 경험하였기에 문헌적 고찰과 아울려 보고하는 바이다.

15. 氣管異物 1例

全南醫大

張寅源・金鍾榮・金聲坤 權寧春・梁漢模

最近 演者等은 45日間 左側氣管支內에 繫留된 plastic gun bullet 1例를 경험하였기에 報告한다.

患者는 11歲 男兒로서 來院 約 45日前에 갑자기 發生한 심한 기침과 呼吸困難으로 地方某病院에서 急性增惡性 肺結核이란 진단하에 强力한 抗結核治療를 받았으나 症狀의 好轉을 볼 수 없어 本外來를 찾아왔다. 흉부 X-線上 左側下葉에 심한 無氣肺가 관찰되었으나異物의 음영상은 發見할 수 없었다. 病歷으로 미루어異物을 의심하고 全身麻醉下에 氣管支鏡檢查를 施行하였던 바 左側 氣管支內에 菜留된 plastic gun bullet 를 發見하고 除去하였으며 除去後 約 1週日間에 無氣肺로 인한 左側肺下葉의 음영은 점진전으로 호전되어 除去後 11日만에 退院하였다.

16. 興味있는 異物 3例

釜山메리造病院

曺重煥・柳太鉉

最近 與味있는 異物 3例를 經驗하였으며 手術後 經 過는 모두 좋았기에 報告하는 바이다.

症例 1: 20歲된 男子에서 誤發된 총알이 氣管 및 食道를 貫通하여 第一胸椎에 박혀 있었다.

症例 2: 1年 5個月된 男兒의氣管 分岐部에 절려 있었던 52cm 길이의 金屬性 목걸이,

症例 3: 17歲된 男子에서 食道第一狹窄部의 食道壁 에 꽂혀있던 pin survey for 228 cases with foreign bodies in the food and air passages who had visited the department of Otolaryngology, National Medical Center and removed endoscopically during the period of last 10 years from 1966 to 1975.

The following results were obtained:

- 1. The total numbers of foreign bodies in the food and the air passages were 228 cases, and among of them 181 cases were foreign bodies in the food passage and 47 cases were foreign bodies in the air passage. The ratio between the food and the air passages was about 3.7:1.
- 2. The prevalent foreign bodies in the esophagus were coin, meat and food particles and bone in order of frequency. In air passage, bean and peanut were most prevalent foreign bodies and the next were metalic substances, fish bone in order of frequency.
- 3. In the age incidence, 65.4% of the esophageal foreign bodies and 67.6% of foreign bodies in the air passage were under 5 years of age especially coin, 92.9%.
- 4. In sex distribution, 99 cases were female, and the ratio between male and female was 1.3:1. There was no significant difference between male and female in the foreign bodies of the esophagus but the foreign bodies in the air passage were more prevalent in male as the ratio of 2.1:1.
- 5. The most prevalent site of lodgement in esophagus was first physiologic narrowing of the esophagus as the count of 83.8%. In foreign bodies of the air passage, bronchial foreign bodies were most frequent. And bronchial foreign bodies were more frequent in the right side as the ratio of 3.7:1.
- 6. In duration of lodgement, 56.0% of foreign bodies of the food passage were removed within 24 hours and almost of them were removed within 5 days. In foreign bodies in the air passage, only 32.4% were removed within 24 hours but 29.7% were removed within more than I week in the air passage.
- 7. Under the esophagoscope, granulation tissue were noted in the 5 cases of the foreign bodies in the esophagus due to foreign bodies. In foreign bodies of the air passage, complication were encoun-

tered in the 4 cases and also removed surgically and among of them, 2 patients were expired due to complications during post operative course.

12. Clinical observation of the foreign bodies in the air and food passages

Dong Soo Lee, M.D., Heung Nam Ok, M.D., Seong Moo Moon, M.D. and Sun Chul Lee, M.D.

Department of Otolaryngology,
College of Medicine, Jung Ang University

Clinical observation is made on the total 205 cases of foreign bodies in the air and food passages. The entire foreign body cases that had visited ENT Dept. of Han Gang Sacred Heart Hospital from January, 1972 to March, 1976 are included in this study.

The results summarized are as follows:

- 1) The majority of the cases of foreign bodies are found in the food passage, 200 cases (97.6%) while in the air passage only 5 cases was present.
- 2) The most common foreign bodies in the esophagus was coin (90%) and in the air passage, the sorts of foreign bodies are bean, peanut, plastic bullet, corn and towel clip.
- 3) In the locality of foreign bodies, the first narrowing is the most frequent site in the esophagus.
- 4) The majority of the cases with esophageal foreign body is male (M:F 1, 4:1), in the air passage (M:F 3:2).
- 5) The patients with esophageal foreign body visited within 3 days in 87%, and with trachiobronchial foreign body visited within a day in all cases.

13. A recent case of an interesting foreign body in the bronchus

Yang Sun Lee, M.D., Jung Min Chi, M.D., Jae Kwun Song, M.D. and Jung Do Kim, M.D.

Department of Otolaryngology,

Kyungpook National University College
of Medicine, Taegu, Korea

The foreign bodies in the food passage and airway

are very important in the Otolaryngological field, and practically there are many reports of them.

Also the kinds of these foreign bodies are variable and almost all things around us are likely to be foreign bodies by momentary mistake.

According to kinds and locations, clinicians often make mistakes in diagnosis with other physical examination except endoscopy, so foreign body was impacted for a long time and sometimes it may bring a grave outcome to the patient.

The authors have recently experienced, in a 13-year-old boy, a pink-colored plastic pencil cap in the right main bronchus which was very similar to the color and shape of the bronchial lumen, and so we had some difficulty in removal of it.

This is the report of clinical findings on this case along with literature review.

14. Foreign body in the air way

S.W. Kim, M.D. and R.B. Hong, M.D., F.A.A.O.O.

Department of Otolaryngology, Presbyterian Hospital, Taegu, Korea

Foreign body in the air way occurs most frequently in children and can produce different symptoms and signs, which may be cofused with other disease.

Recently we experienced 3 cases of air way obstruction due to foreign body, and removed under general anesthesia with foreign body forceps and brief review of literature was made.

15. A case of a bronchial foreign body

In Won Chang, M.D., Jong Yung Kim, M.D., Sung Kon Kim, M.D., Young Choon Kwen, M.D. and Han Mo Ryang, M.D.

Dept. of Otolaryngology, Chonnam University Medical School

This is a case of a left lower bronchial foreign body in a II years old boy.

This boy was admitted to E.N.T. clinic, Chonnam

University Hospital with the complaints of paroxysmal attack of cough and dyspnea for 45 days. He had been treated at a local clinic under the diagnosis of active pulmonary tuberculosis, however, no significant response was achieved by the treatment.

The chest X-ray film showed atelectatic shadow, however, no density of suspicious foreign body was observed. On the clinical points of view and the patient's history, bronchoscopy was carried out under the general anesthesia and a plastic gun bullet was removed from the left main bronchus.

The boy was discharged from the hospital with good aeration of the left entire lung field and good recovery.

16. 3 Cases of interesting foreign bodies

Joong Hwan Cho, M.D. and Tai Hyun Yu, M.D.

Dept. of Otolaryngology, Maryknoll General Hospital, Busan

We have recently removed three interesting foreign bodies uneventfully.

Case 1: In 20 years old boy, the bullet which penetrated his trachea and esophagus through, lodged on second thoracic vertebra.

Case 2: In 1 5/12 year old boy, 52 cm metallic neck lace was hung on the bifurcation of bronchus.

Case 3: In 17 years old boy, the pin was stuck in the wall of his esophagus.

17. Achalasia treated with mercury dilation

S.H. Lee, M.D. and R.B. Hong, M.D., F.A.A.O.O.

Department of Otolaryngology Presbyterian Hospital, Taegu, Korea

Achalasia is a disorder of the esophagus. Characterized principally by dysphagia resulting from lack of effective forward peristaltic movement of the body of the esophagus and failure of relaxation of the lower esophageal segment.

It is probably caused by an extra-esophageal vagal