

**FP 15: Delayed Presentation Of Supraglottic Web
From Caustic Ingestion**

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ABSTRACT

Introduction

Sequelae of caustic injury such as the development of acquired supraglottic web or stricture is rare and usually presents 1 to 2 months post injury. The development of supraglottic strictures and stenosis is rare. There are only a few reports regarding the treatment of supraglottic stenosis. Hence, there has been no developed consensus regarding its optimal treatment.

Case Presentation

We present a case of a 13 year old male who was admitted for supraglottic web secondary to caustic ingestion when he was 2 years of age. Patient at 2 years old accidentally ingested liquid sosa (corrosive alkali agent) where he was then brought to our institution. Emergency tracheostomy was done for airway protection. He also underwent exploratory laparotomy and tube J gastrectomy. He was discharged improved but was then lost to follow up. Patient underwent corking but was unable to tolerate procedure and presented with dyspnea. He then consulted at our outpatient clinic last August 2017 desirous of decannulation. On flexible scoping, supraglottic web was noted. Hence patient underwent excision of supraglottic web using CO2 laser.

Discussion

Accidental caustic ingestion usually occurs among the 2 to 3 year old age group. Majority sustain gastroesophageal complications immediately post ingestion. Acquired supraglottic web after caustic ingestion is unusual and its treatment controversial in the pediatric age group. Prompt intervention especially among children who have underwent tracheostomy for airway protection is needed to allow early decannulation and hence return to function.

Keywords: supraglottic web, caustic ingestion, CO2 laser
