



#### **Learning Objectives**

- Indentify the clinical symptoms and radiographic signs of button battery ingestion
- Rapidly formulate a plan for the patient with button battery ingestion

## 22 m.o. female

- Increase in drooling over the past two days
- Occasional cough with eating
- Difficulty swallowing when eating
- Youngest of three



#### **Symptoms Can Include**

- Airway obstruction or wheezing
- Drooling
- Vomiting
- Chest discomfort
- Difficulty Swallowing, decreased appetite, refusal to eat
- Coughing, choking, or gagging with eating or drinking



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#### NOTE:

Patient may OR may not have an ingestion history

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# Must rule out button battery ingestion



If swallowed, button batteries can cause serious injury or death in as little as two hours.

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#### **Button Batteries**

- A true emergency
- Serious sequelae include:
- Esophagus esophageal burn, perforation, fistula
- Nose damage to nose, nasal septum
- Ear TM perforation, EAC burn

#### **Esophageal battery protocol**

- > 3000 BB ingestions/year
- 2006-2017: 6 fold increase in severe injuries; 12 fold increase in mortality
- Damage occurs in as little as 2 hours

#### Imaging

- Always get two view Xrays AP and Lateral
- Flat surface of best seen on AP view when in esophagus
- Flat surface of best seen on Lateral when in trachea
- Double Halo sign / Step Off sign = Button Battery





#### What is a button battery?

- 5mm 25mm in diameter, 1mm 6mm tall
- Stainless steel forms bottom body / positive terminal
- Metallic top negative terminal
- Contents can include: zinc, lithium, manganese dioxide, silver oxide, carbon monofluoride, cupric oxide

#### **Methods of Injury**

- Creation of electrical current that hydrolyzes tissue fluids and produces hydroxide at the battery's negative pole
- Leakage of battery contents (Esp. Alkaline electrolyte)
- Physical pressure on adjacent tissue



## Remember the 3 Ns • Negative – Narrow – Necrotic • The negative pole of the battery, which is the narrow side on the Xray, causes the most damage Swallowed a battery? Get help from the battery ingestion hotline immediately CALL 800-498-8666

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#### Immediate Treatment of Suspected Button Battery Ingestion

- 10mL of honey (if child > 12 months) or sucralfate every 10min
- Do not induce vomiting or give cathartics

#### Laryngoscope

#### Bronchoesophagology

pH-neutralizing esophageal irrigations as a novel mitigation strategy for button battery injury Rachel R. Anfang MA, Kris R. Jarana MD , Rebecca L Linn MD, Keith Rhoades BS, Jared Fry BS, Ian N. Jacobs MD First published: 11 June 2018 | https://doi.org/10.1002/Jary.27312 | Cited by: 4

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## Determining size of battery

- 20 mm lithium coin cell is most frequently involved in esophageal injuries
- Smaller batteries can lodge and cause problems too, but less frequently



## Esophageal Button Battery

Removed from esophagus 2 hours after ingestion







## But wait! There's more!

- 4 year old boy
- Playing with bike light
- Comes to parent "something stuck in nose"

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## **Nasal Button Battery**

- EC attempted removal unsuccessful
- ENT consulted
- To OR within 4-5 hours of insertion







#### Where can you find button batteries? Portable stereos

- Remote Controls · Tea lights / flameless candles
- · Garage door openers
- Keyless entry fobsBathroom scales
- Parking transponders
- Toys
- Cameras
- WatchesPDAs
- Calculators
   Digital Thermometers
- Hearing Aids
- Singing Greeting CardsTalking books
- Bedwetting monitors Keychains
  Flashing / lighted jewelry or attire
  Any powered house hold item Texas Children's Hospital

Handheld Video Games

Home medical equipment / metersFlash and pen lights

Cell phones

 Flashing shoes Toothbrushes



#### **Bibliography**

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- <sup>1</sup> Loado Tartello, Carto Marco, Carto Marco, Alexandro Marco, Alexandro Marco, Alexandro Marco, Alexandro Martin, Santo Mar

## **Questions?**

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