Gossypiboma Presenting as a Sterile Abscess

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We present a case of a chronic abdominal pain which was due to a retained surgical sponge 4 years after an open cholecystectomy. A review of literature was done with emphasis on the incidence and factors contributing to such entity. The medicolegal aspect was discussed.

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Retained postoperative foreign bodies, of which sponges are the most common. It is rare but dangerous error following neurosurgical operations. Retained gauze or other foreign bodies seem to be common in general and gastro-intestinal surgery and to lesser extent in gynecology and obstetrics and orthopedics operations. The term “gossypiboma” has been adopted because of the fear of retained sponge (RS) causing gossip on surgeons.

The incidence ranges from 1 in 100 to 1 in 5000 operations. Foreign bodies are left in surgical patients in one out of every 1,000 to 1,500 intra-abdominal procedures. This corresponds to one or more cases each year for a typical large hospital. The rate is likely to be underestimated because it was calculated through malpractice claims.

Gawande et al found foreign bodies in the abdomen, pelvis (54%), vagina (29%), extremities (17%), thorax (7.4%) and elsewhere including the spinal canal, face and brain; no retained items in laparoscopic or endoscopic procedures. They reported that when object was lost and a count was performed, the count was thought to be correct in 88% of the cases.

The aim of presenting this case is to increase the awareness of the medical community to a common human error during surgery.

THE CASE

A thirty-six-year-old female presented with recurrent right upper abdominal pain for 3 years. The pain was dull, radiating to the back, lasting for hours and not associated with other gastrointestinal symptoms. Three months prior to her admission, the pain increased in frequency and in severity. It was associated with frequent vomiting but no fever or other constitutional symptoms.

She had an open cholecystectomy 4 years ago in another hospital. Her family and social histories were not remarkable. On examination, she was afebrile and she had stable vital signs. Her systemic examination was within normal but her abdomen showed right subcostal

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