



Foreign body inhalation: a nut in the tree

A 69-year-old man presented with a 3-week history of intermittent interscapular dull ache, complicated by small volume haemoptysis. Contrast-enhanced computed tomography of the thorax showed no evidence of pulmonary embolism, but demonstrated a well circumscribed lesion, 10 mm in diameter, in the right bronchial tree (Figure, A), leading to suspicion of a neoplasm. Using flexible bronchoscopy, we successfully removed a whole macadamia nut (Figure, B) that was obstructing the bronchus intermedius at the level of the right middle lobe orifice.

Additional history obtained after the procedure revealed an aspiration event 3

weeks before admission. The patient reported having tripped while walking upstairs and concurrently eating a handful of macadamia nuts, resulting in a coughing spell that lasted the better part of the night.

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