

of nicotine, propylene glycol, glycerine, tobacco extracts, flavorants and/or adulterants which vaporize to an aerosol/vapor. A study has shown that long term exposure to propylene glycol has been found to exacerbate and/or induce multiple allergic symptoms in children. However, we have not been able to identify any other articles detailing a specific allergic or anaphylactic reaction secondary to ingredients in e-cigarette liquids. Further research is needed to characterize the potential adverse effects of exposure to e-liquids.

### PP 56

#### "THE TOY STORY" – DILDO IN RECTUM

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#### INTRODUCTION

Intra-abdominal foreign body is uncommon to be encountered in emergency setting especially usage of sex toys. We present such a case where patient presented with dildo stuck in the rectum.

#### CASE DESCRIPTION

27 years old RVD positive man who was not on any HAART therapy presented to our emergency department complaining of a sex toy (Dildo) got stuck in the anus since a night before presentation to emergency department. Patient was under recreational drug abuse upon during the incident. Patient was also complaining of abdominal pain and unable to pass out flatus. On examination, his vital signs were normal, the abdomen was not distended and bowel sounds were present. Digital rectal examination

revealed a foreign body. The case was referred to the surgical team for examination under anesthesia and removal was done under rigid sigmoidoscopy with no obvious mucosal injury/perforation noted. Patient was discharged well after 2 days hospitalization

#### DISCUSSION/CONCLUSION

Sex toy abuse is uncommon in daily practise especially in emergency department. However, the patient who is in high risk group (RVD Positive) was able to provide clear history, sex toy abuse should be considered. A systematic "package" of management including calming the patient, pharmacotherapy, radioimaging (abdominal x-ray) and counselling should be given to prepare patient before removal of the foreign body. We should be careful and precaution steps and proper systematic management needed to prevent the patient from becoming more agitated which will harm himself (possibilities for perforated viscus). Early referral to the surgical team will ensure the foreign body to can be removed as early as possible to prevent any obstructive symptoms. Upon discharge patient should be referred to psychology department for counselling to prevent recurrence in future.

### PP 57

#### DEADLY AIRBAGS TOWARDS PAEDIATRIC POPULATION

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#### INTRODUCTION

There is always been a myth that airbag has always been the saviour of life. Airbags are not cribs or babysitters.