Magnetic resonance imaging in a patient with retained shotgun pellets: avoid second shot

Eski Ateşli Silah Yaralanmasında MRI Görüntüleme, İkinci Kez Ateş Etmeğin

Sinan Tan¹, Ahmet Aslan¹, Ömer Dizdar²
¹Department of Radiology, Şevket Yılmaz Education and Research Hospital, Bursa, Turkey
²Department of Medical Oncology, Atatürk Education and Research Hospital, Ankara, Turkey

To the Editor,

A 70-year-old man presented with rectal bleeding. Sigmoidoscopy detected a vegetating mass in rectum, biopsy of which showed adenocarcinoma. Chest and abdominal computed tomography (CT) and pelvic magnetic resonance imaging (MRI) was ordered for staging. But chest x-ray of the patient which was taken for preoperative anesthesia consultation detected multiple well-circumscribed opacities in thorax wall and left arm (Figure 1). Personal history of the patient revealed surviving after attempted murder with a pellet shotgun 20 years ago and those opacities were the retained pellets. Therefore MRI was cancelled and pelvic CT was ordered instead. Ferromagnetic foreign bodies are potentially hazardous for MRI. Interaction of the magnetic fields with such objects can lead to trauma due to movement of the object in the magnetic field or thermal injury from heating of the object. MRI induced migration of a retained intraocular foreign body secondary to gunshot pellet trauma was reported previously (1). Obtaining a detailed history and simply ordering an x-ray is crucial in suspected cases.

Kaynaklar