

Part one

1. (b) and (e) Asthma must always be ruled out in children presenting with chronic cough, even without wheeze. However, in such an otherwise healthy 2-year-old an inhaled foreign body must be foremost in mind. A foreign body such as a raisin or a piece of plastic from a toy can cause a cough, and if it only partially obstructs an airway can lead to few or no physical signs and may not appear on X-ray.

Part two

2. (d). (b) is a dangerous road to follow, and (e) is most unlikely. With all the other choices Judith would be more ill.

Part three

3. (e) Bingo! Dr Ndebe had his answer!

Part four

4. (c). On rigid bronchoscopy under general anaesthesia the tip of a small plastic elephant's trunk was seen at the tracheal bifurcation. It was gently and smoothly removed with forceps to reveal a toy elephant's head. Dr Ndebe decided on rigid, rather than flexible, bronchoscopy as the initial step so as to avoid the need for two investigations. Using a flexible bronchoscope to identify a foreign body initially would mean that he would have to go in again with a rigid scope to remove it. To choose (a) would not help the diagnosis, and (d) and (e) would be disastrous.

Part five

5. (b), (c), (d), and (e). It is vital not to miss an inhaled foreign body, as it can lead to fatal complete airway obstruction, pneumonia, pneumothorax, and subglottal oedema in the short term, and recurrent pneumonia, lung abscesses, and bronchiectasis in the longer term. Foreign body inhalation should be considered in any small child with a chronic cough of unknown origin. The history should include asking the parents about choking. A simple chest examination and even X-ray is not enough to rule out foreign bodies in the airways.