

Clinical-Medical Image

Trichobezoar

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Figure 1: Trichobezoar Panel_A.



Figure 2: Trichobezoar Panel_B.

Clinical Image

A 6-year-old girl was referred to the emergency department (ED) by her primary care provider with an abdominal mass. She had no past medical history and a normal development to date. On arrival she appeared well, pain free, vitals were within normal limits. Further questioning revealed she had a three month history of trichotillomania with trichophagia which coincided with the birth of twins in her family. Examination revealed a large, non-tender, well circumscribed mass in the epigastrium, with some crepitus. Laboratory investigations were unremarkable. An abdominal x-ray showed a large intra-luminal mass filling most of the stomach (Figure 1, Panel A). She underwent laparotomy to remove the mass which was confirmed to be a trichobezoar (Figure 1, Panel B). Post-operative recovery was uneventful. Child-psychiatry was consulted regarding her trichotillomania and trichophagia which were diagnosed as being secondary to anxiety. She was managed with play therapy and has not had any further instances of trichophagia.

Keywords: Trichobezoar; Abdomen; Trichophagia

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