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**Answer: Right nasal rhinolith**

Rhinolith is a stone that is formed inside the nasal cavity, typically around a nidus. A nidus can be internal or external in origin with the latter being more common. Internal source of nidus include mucus or blood clot, whereas external source is usually from neglected foreign bodies either inserted intentionally by children or accidentally (post-nasal interventions or trauma).

With time, a rhinolith will grow to accommodate the space of the nasal cavity. The obstruction of the normal mucociliary clearance of nasal discharge will lead to stasis. Besides promoting infection, secretions which contains calcium salts will get deposited onto the obstructing nidus resulting in increase the size over time.

The clinical presentation of rhinolith varies, depending mainly on the size, location and shape of the concretion. Unlike external nasal foreign body which tend to present more acutely with unilateral foul-smelling nasal discharge, the rhinolith may remain in the nasal cavity for many years until it's size exerts some degree of obstructive or pressure effect to the surrounding structure.<sup>1</sup> Rhinolith may remain silent for long period owing to the nature of the nidus, more commonly the non-organic ones. Occasionally the patient themselves may not be aware of the foul smelling discharge until they are



Rhinolith removed from the patient in pieces.

informed.<sup>1</sup> However patients, may present with unilateral nasal obstruction, pain in the nose and signs of rhinosinusitis such as and epistaxis and purulent discharge. These conditions should increase the clinical suspicion of rhinolith and warrant a thorough nose and paranasal sinuses examination including the use of nasal endoscopy. Not uncommonly, the diagnosis of rhinolith is made when a patient present with other unrelated symptoms.

There is no specific investigation for rhinoliths. Diagnosis can be made with thorough nasal endoscopic examination or radiological imaging such plain radiography or computed tomography (CT) scan. Diagnosis of rhinolith has been reported from routine dental radiograph.<sup>2</sup> If estimation of the size cannot be made by endoscopic examination, a CT scan can be very a helpful and provide roadmap for surgery.

**REFERENCES**

- 1: Brehmer D, Riemann R. The rhinolith: a possible differential diagnosis of a unilateral nasal obstruction. *Case Report Med.* 2010. Article ID 845671. doi:10.1155/2010/845671.
- 2: Barros CA, Martins RR, Silva JB et al. Rhinolith: a radiographic finding in a dental clinic. *Oral Surg Oral Med Oral Pathol Oral radiol Endod* 2005; 100:486-90.