SHORT REPORTS

An unusual case of "pot belly"

Numerous cleverly contrived methods for smuggling illicit drugs have been attempted. Occasionally the smuggler is victimised by his own ingenuity. We report a case in which surgical removal of the drugs was necessary.

Case report

A 32-year-old man who is normally domiciled in the US was admitted to the General Hospital, Nottingham, with a seven-day history of epigastric pain and intermittent blood-stained vomiting. He said that one month before admission he had swallowed 18 home-made sachets filled with hashish oil. Each sachet consisted of a contraceptive sheath filled with the hashish oil, which was then wrapped in an outer covering of a small, thin plastic bag. Over these four weeks he had recovered only 12; two being vomited and 10 having passed rectally. He had attended accident and emergency departments in two other hospitals but, according to the patient's account, nothing had been done since his story was not believed.

Physical examination disclosed no abnormality, and no opaque foreign body was seen on plain abdominal radiographs. A barium meal examination, however, showed six cylindrical foreign bodies freely mobile in the stomach (see figure). There also appeared to be deformity of the pylorus and duodenal cap consistent with previous peptic ulceration. Screening suggested that the six condoms retained in the stomach would never pass through the deformed gastric outlet.

Barium meal showing packets of hashish oil in stomach.

To forestall possible disintegration of the condoms and a potentially lethal overdose a laparotomy was performed, and they were removed. Each sachet measured approximately $60 \times 30 \times 20$ mm, and each contained about 55 g of hashish oil. A truncal vagotomy and pyloroplasty was performed at the same time. Postoperative recovery was uncomplicated, and the patient was discharged into police custody on the 13th day after operation.

Discussion

We think that this case may be the first reported in which a smuggler has come to grief because of pre-existing gastrointestinal disease and in which surgical removal of the contraband was necessary. Cannabis is usually smuggled in the form of the concentrated resin known as hashish. In recent years the technique of swallowing packets of hashish oil has become popular as a successful method of avoiding detection by customs authorities. Many types of container have been tried for this purpose and condoms are used quite often. Surgical removal is indicated if the packets are retained in the stomach because

there is a danger of the rupture of the container and subsequent intoxication, as reported by Lopez *et al.*¹ There is also a risk of ulceration and perforation if foreign bodies remain in the stomach for a long time.²

Cases such as this present legal as well as medical problems. The quantity of hashish was large but our medical defence organisation advised that it was not the duty of the medical staff to inform the police as the nature of the packages had been disclosed in confidence. Disposal of illicit drugs removed from a patient presents major difficulties as it would be a criminal offence either to destroy them or to return them to the patient. They should be handed to the theatre sister whereupon they become the responsibility of the hospital authorities, as in the case of all foreign bodies removed from patients.

¹ Lopez, H H, *et al*, *Journal of the American Medical Association*, 1974, **227**, 1041.

² Sleisenger, M H, and Fordtran, J S, *Gastrointestinal Disease*. Philadelphia, W B Saunders, 1973.

(Accepted 2 September 1977)

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Smoking behaviour in medical students

In 1967 a Government Social Survey¹ of the smoking habits of medical students showed that 52% of the men and 35% of the women were smokers. To determine whether the continuing publicity about the dangers of smoking had altered smoking habits in medical students, a questionnaire was sent to all 475 preclinical and clinical students of the Royal Free Hospital School of Medicine in October 1976.

Results

A total of 413 replies were received, 189 from men and 216 from women. Eight students did not state their sex.

Incidence of smoking—Students were asked if they smoked at all now or, if not, whether they had ever smoked as much as one cigarette a day or one ounce (28 g) of tobacco a month for as long as one month. On this basis there were 89 smokers, 37 regular ex-smokers, and 287 non-smokers. The table shows the numbers in each category for each medical school year. In

Percentage of non-smokers, ex-smokers, and current smokers in each medical school year

		Non-smokers	Ex-smokers	Current smokers	Number in sample
1st Year	Men	61	10	29	41
	Women	76	4	20	54
2nd Year	Men	49	9	42	33
	Women	74	2	24	42
3rd Year	Men	70	10	20	40
	Women	83	12	5	42
4th Year	Men	65	15	20	40
	Women	71	13	16	38
5th Year	Men	60	11	29	35
	Women	85	3	12	40
Total	Men	61	11	28	189
	Women	78	6	16	216

The eight students who did not state their sex have been excluded from this analysis.