

Mule Syndrome: A Case Report

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Summary:

Drug trafficking and sales frequently involve the intra-abdominal transport of large quantities of drugs, usually cocaine or heroin. We report here the cases of two men aged 21 and 23, arrested at Marrakech airport in Morocco for ingesting hashish capsules, who were taken to the emergency department of the Mohammed VI University Hospital.

Keywords: Mule syndrome, hashish Marrakech.

Case Report

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INTRODUCTION

Mule syndrome is the transport of drugs through the digestive tract of drug couriers, which can lead to life-threatening digestive and/or toxic complications. We report the case of two men intercepted at Marrakech airport in Morocco.

OBSERVATION

We report here the cases of two men aged 21 and 23, both with no particular pathological history, arrested at Marrakech airport in Morocco. According to airport security officers, the two men were behaving and acting suspiciously, which

prompted a more thorough check, followed by their arrest and transfer to the emergency department of the Mohammed VI University Hospital. When they were admitted to emergency, the clinical examination did not reveal any particular abnormality. An abdominal CT scan revealed grossly ovoid intradigestive foreign bodies associated with capsules. Both patients were asymptomatic and were kept under observation in the visceral and digestive surgery department until all ingested capsules containing Hachich had been completely evacuated, i.e. they were kept under observation for two days.

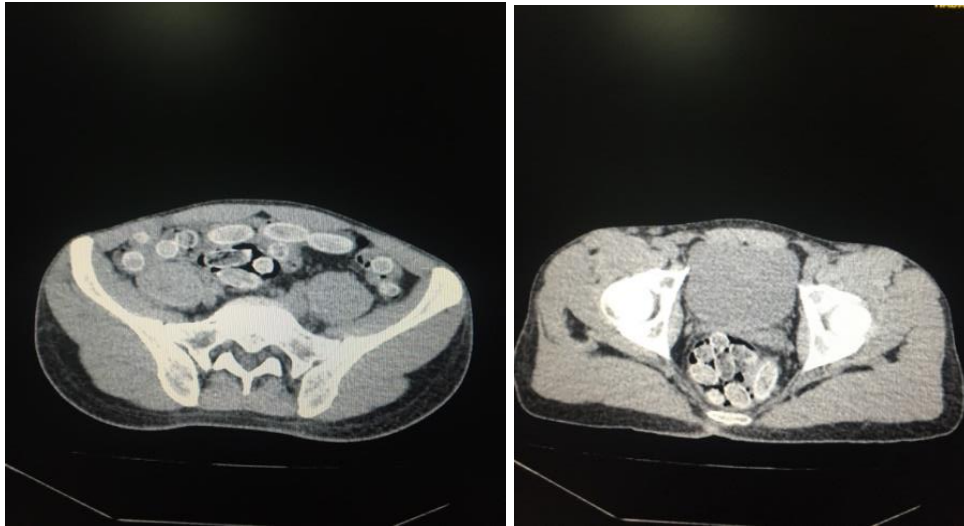


Figure 1: CT image showing spontaneously hyperdense ovoid intra-gastrointestinal foreign bodies in association with capsules



Figure 2: Capsules containing Hachich after removal by patients

DISCUSSION

Incidence of body wrapping of cocaine from South America to the United States and Europe is increasing, which is attributed to the expansion of the large international trade in illicit drugs. The drug is generally placed in packets containing 3 to 15g of cocaine and made up of several layers of latex and a hard wax coating of varying quality [1]. Four types of drug packet have been described: Type 1 packages, containing loose drugs covered with two to four layers of packaging like condoms and therefore presenting a high risk of leakage or breakage; Type 2 packages, consisting of a loose drug package covered with five to seven layers of tubular latex, each layer having the consistency of a latex glove; Type 3 packages, which take the form of hard drug packets wrapped in aluminium foil and covered with three to five layers of tubular latex securely

attached at both ends, obtained by a mechanical manufacturing process; and Type 4 packages, prepared by dissolving the drug in an alcohol-water solution, then hardening it and placing it in tubular latex supplemented with coloured paraffin or glass fibre to reduce radiodensity and minimise the risk of detection [2, 3]. In our series, these were type 2 packets. Usually, the vast majority of body packers apprehended by airport authorities do not require hospitalisation [4]. The diagnosis in clinically asymptomatic passengers is based on information obtained by the police, customs officers or members of the aircraft crew, confirmed secondarily by clinical examination and plain abdominal X-rays or CT scans of the abdomen and pelvis to demonstrate intra-gastrointestinal foreign bodies [1, 4], in the case of our patients.

CONCLUSION

The mule syndrome is a particular entity that all surgeons should be aware of, as its management requires special precautions that, if not taken properly, may result in the death of the smuggler.

REFERENCES

1. Single Convention on Narcotic Drugs, https://www.unodc.org/pdf/convention_1961_en.pdf.
2. The United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, https://www.unodc.org/pdf/convention_1988_en.pdf.
3. Traub, S. J., Hoffman, R. S., & Nelson, L. S. (2003). Body packing—the internal concealment of illicit drugs. *New England Journal of Medicine*, 349(26), 2519-2526.
4. Cappelletti, S., Piacentino, D., & Ciallella, C. (2015). Commentary on confounding definitions and descriptions of body packing. *Abdominal imaging*, 40, 3365-3366.