Images in Pneumonology

Pneumomediastinum

Panagiotis Boglou¹, Konstantinos Archontogeorgis¹, Paschalis Steiropoulos¹, Ioannis Chrysafis², Sophia Pozova¹, Demosthenes Bouros¹

¹Department of Pneumonology, Medical School, Democritus University of Thrace, Alexandroupolis, Greece ²Department of Radiology, University Hospital of Alexandroupolis, Greece A 17 year- old patient, with smoking history of 3 P/Y and with bronchial asthma since childhood, was admitted to our department of worsening dyspnea and productive cough.

After three days of hospital stay, clinically overt subcutaneous emphysema, was extended along the left hemithorax. Chest X-ray confirmed subcutaneous emphysema of the left hemithorax with extension to the left cervical fascia (Images 1 and 2). A high resolution computed tomography of the chest showed pneumomediastinum in the upper-anterior mediastinum and the subclavicular region, and subcutaneous emphysema in the soft tissue of the cervical area, of the left axillar region and of the upper back region; while air bubbles were also observed in the epidural space (Images 3 and 4). The findings were compatible with spontaneous pneumomediastinum.







FIGURE 2

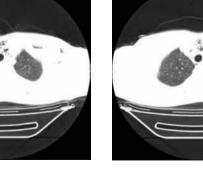


FIGURE 3

FIGURE 4

Correspondence to:

Paschalis Steiropoulos, MD, PhD, FCCP Medical School, Democritus University of Thrace Department of Pneumonology, University Hospital of Alexandroupolis 68100 Alexandroupolis, Greece Tel.: +30 2551075333 E-mail: pstirop@med.duth.gr