IMAGENS EM MEDICINA IMAGES IN MEDICINE

PNEUMATOCELE AFTER THORACIC TRAUMA

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A 20-year old male patient presented at the emergency department with occipital headache, chest pain and hemoptysis, following an accident while playing sports (fall after impact with another player). There was no known relevant patient history or usual medication.

Initial work-up revealed an occipital hematoma and right lumbar pain, in the absence of rib fracture or subcutaneous emphysema. Crackles at the lower-third of the right hemithorax were noted at auscultation. No abnormalities were found on the cranial computed tomography (CT) or chest x-ray.

Due to a new onset of hemoptysis, a chest CT was carried out showing a pulmonary subpleural, para-vertebral, air-filled lesion, measuring 1.2 x 7cm (axial x longitudinal diameter). Given the recent traumatic injury, a pneumatocele was suspected secondary to a discrete parenchymal laceration. An adjacent 5cm ground-glass opacity was seen, suggesting an associated alveolar hemorrhage (figure 1).

Owing to clinical stability, the patient was not submitted to an emergency bronchoscopy and was admitted for a two-day surveillance. There was a complete symptomatic relief on the discharge day and re-evaluation following one month showed a total filling of the pulmonary parenchymal lesion (figure 2).





Chest CT scan for reassessment.



Figure 1

Admission chest CT scan.