

Spontaneous pneumomediastinum

Neumomediastino espontáneo

Pneumomediastinum is defined as the presence of air in the mediastinal cavity. Can be classified into two categories: secondary pneumomediastinum, when there is a causative etiological factor and spontaneous pneumomediastinum, without a clear etiology. Spontaneous pneumomediastinum is a rare disease in adults and most often affects young adults males in a relation to females of 8:1. Is usually benign, self-limited and just recurred in rare cases. Sometimes the diagnosis on chest radiography can be difficult¹⁻⁵. The authors describe a case of a young men, 19 years old, crew ambulances worker, occasional smoker (less than one packet per year), with no relevant medical history or usual medication that appealed to the emergency department with central chest pain with pleuritic characteristics associated with dyspnea that started on resting. The patient denied recent trauma, physical exertion or invasive medical examinations. The objective examination showed cervical subcutaneous emphysema without any other changes. Electrocardiogram and blood tests including hemogram, renal and hepatic parameters, C reactive protein, D-dimers and troponin were normal. Chest radiography (Figure 1a) and computed tomography (Figure 1b) showed the presence of pneumomediastinum and emphysema that dissected the lower cervical plans without further changes. The patient was admitted to the Pulmonary Department for 4 days where he had rest, oxygen therapy and symptomatic relief. The patient presented clinical improvement without presenting recurrence until the present time.

BIBLIOGRAPHY

1. Sahni S, Verma S, Grullon J, Esquire A, Patel P, Talwar A. Spontaneous Pneumomediastinum: Time for Consensus. *Nam J Med Sci.* 2013;5(8):460-464.
2. Kouritas V, Papagiannopoulos K, Lazaridis G, Baka S, Mpoukovinas I, Karavasilis V et al. Pneumomediastinum. *J Thorac Dis.* 2015;7(S1):S44-S49.
3. Caceres M, Ali S, Braud R, Weiman D, Garrett H E. Spontaneous Pneumomediastinum: a comparative study and review of the literature. *Ann Thorac Surg.* 2008;86:962-966.
4. Fatureto M, Vieira dos Santos J, Goulart P, Maia S. Pneumomediastino espontâneo: Asma. *Rev Port Pneumol.* 2008; XIV(3):437-441.
5. Semedo F, Silva R, Pereira S, Alfaiate T, Costa T. Pneumomediastino espontâneo: relato de um caso. *Rev Assoc Med Bras.* 2012;58(3):355-357.

DIAGNOSIS

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Figure 1A. Thoracic radiography (postero-anterior and lateral view) with linear hypertransparencies covering the mediastinal structures (see arrows).

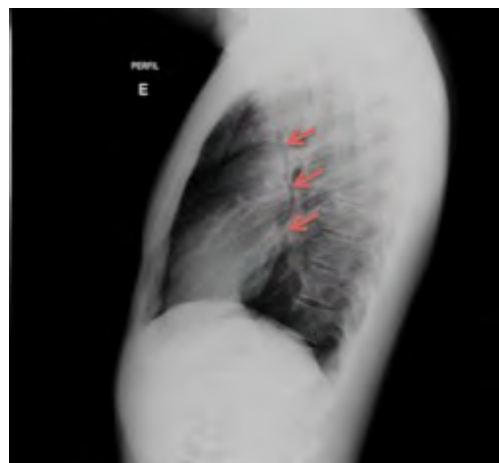
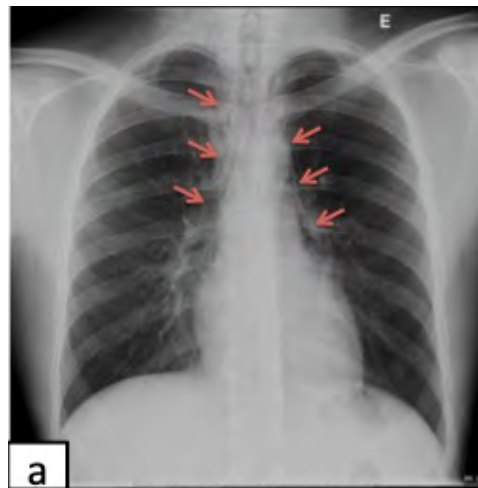


Figure 1B. Computed tomography of the lung (pulmonary window) with two cross-sections (tracheal and segmental bronchi level) showing air at inferior cervical plan and mediastinal structures (see arrows).

