

[PICTURES IN CLINICAL MEDICINE]

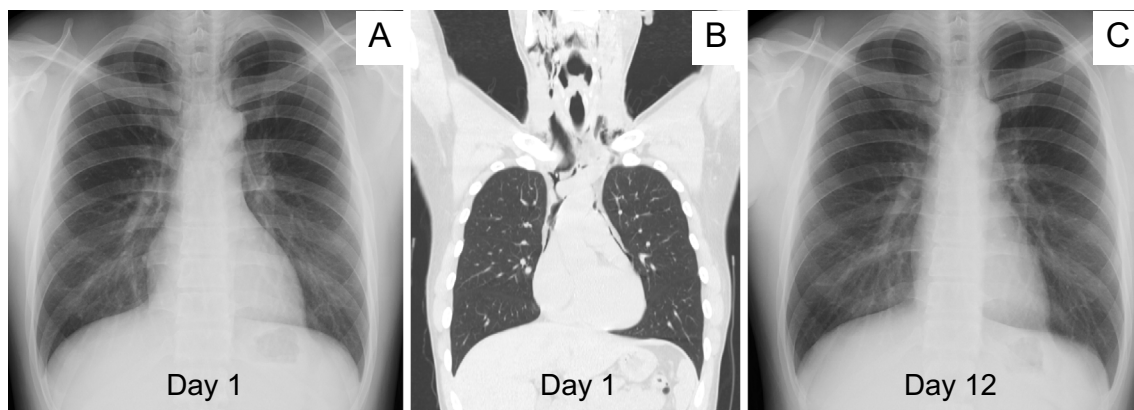
Spontaneous Pneumomediastinum in a Previously Healthy Patient

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Key words: pneumomediastinum, chest pain, neck pain, fullness of ear, snowball crepitation

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Picture.

A 23-year-old previously healthy man visited the emergency department complaining of chest pain, right neck pain, and fullness of the right ear that developed while he was playing futsal. Snowball crepitation around his neck was palpated, and subcutaneous emphysema was suspected. Chest X-ray and computed tomography revealed pneumomediastinum extending to the ear region, without evidence of pneumothorax or bullous changes or rib fracture (Picture A and B). Abstinence from exercise was advised, and his pneumomediastinum resolved (Picture C). Spontaneous pneumomediastinum in patients without underlying disease is rare but involves air leaking from ruptured alveolar spaces created by a pressure gradient between the alveoli and interstitium (1). Although the present patient was not overly thin (body mass Index: 25.7 kg/m²), it is well known that spontaneous pneumomediastinum frequently develop in young men with a tall, thin body. Macia et al. reported that physical exercise was the most common trigger (12%); however, no apparent trigger was found in 51% of patients (2). The most common symptoms were chest pain (85%), dyspnea (49%),

neck pain (44%), and odynophagia (37%). Physicians should remember that pneumomediastinum can occur spontaneously and interpret chest X-ray findings with caution.

The authors state that they have no Conflict of Interest (COI).

References

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