



IMAGES IN THORAX

An uncommon complication of staphylococcal pneumonia: pneumopericardium with cardiac tamponade

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A 1-year-old girl presented with a 3-day history of fever, cough, and dyspnoea. A chest radiograph demonstrated consolidation in the right upper lobe (figure 1A). Laboratory tests showed leucocytosis and blood culture showed oxacillin-sensitive *Staphylococcus aureus*. A radiograph performed 12 days later (figure 1B) showed pneumatocele formation. On the 25th day, the patient's condition worsened abruptly, with hypotension. A chest radiograph (figure 1C, D) showed pneumopericardium. Pericardiocentesis was performed, but the child died 2 days later. Tension pneumopericardium has a very high mortality rate in the absence of early recognition and acute intervention. If there is evidence of tamponade, pericardiocentesis is essential.^{1 2}

Contributors CC, EM and GZ planned the study. GZ and BH conducted a survey. EM submitted the study. CC and EM are responsible for the overall content as guarantors. GZ and BH

collected the data. GZ and BH analysed and interpreted the samples and the data. CC and EM wrote the manuscript. All authors revised and approved the final version of the manuscript.

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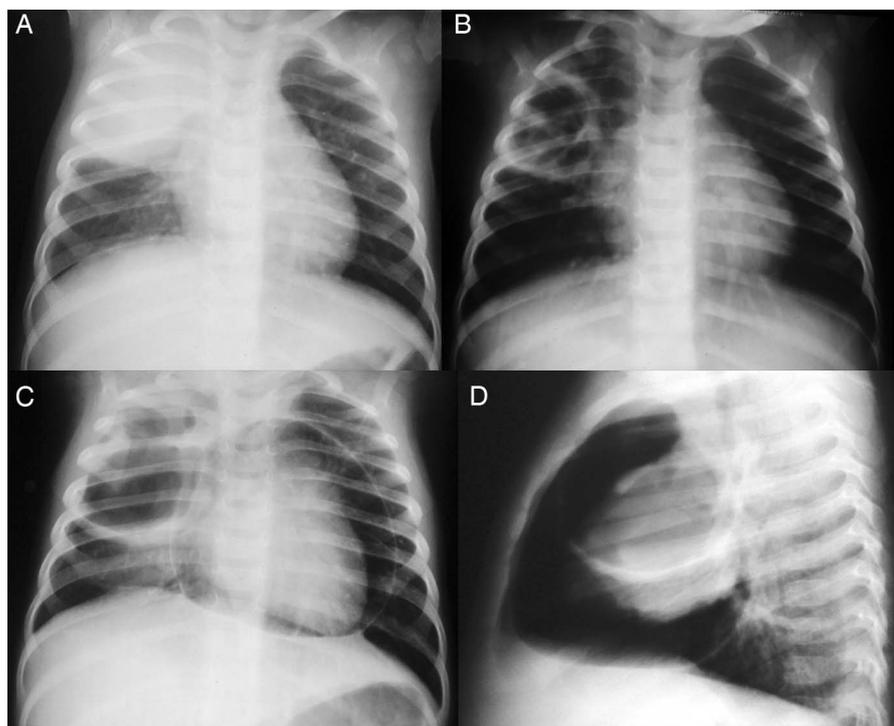


Figure 1 (A) Chest radiograph showing homogeneous consolidation in the right upper lobe of the lung. (B) Radiograph obtained 12 days later shows the formation of cavities (pneumatocelles) in the area of consolidation. (C) and (D) Examination performed 10 days after B showing greater inflation of the pneumatocele and the presence of massive pneumopericardium.

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