

## IMAGES IN THORAX

## Man in the bubble

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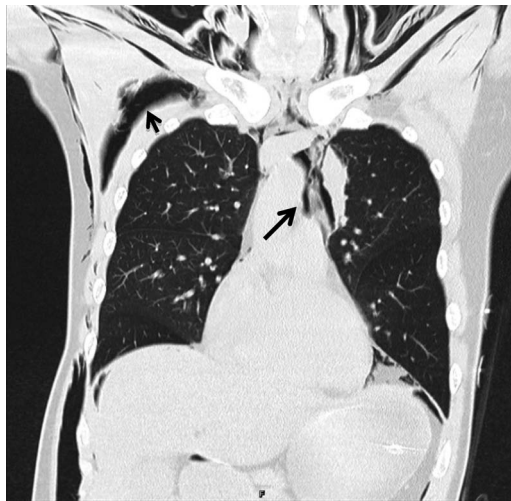
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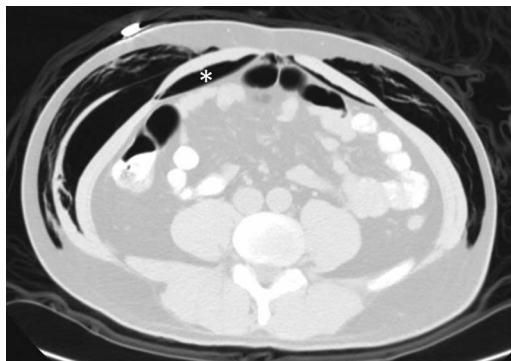
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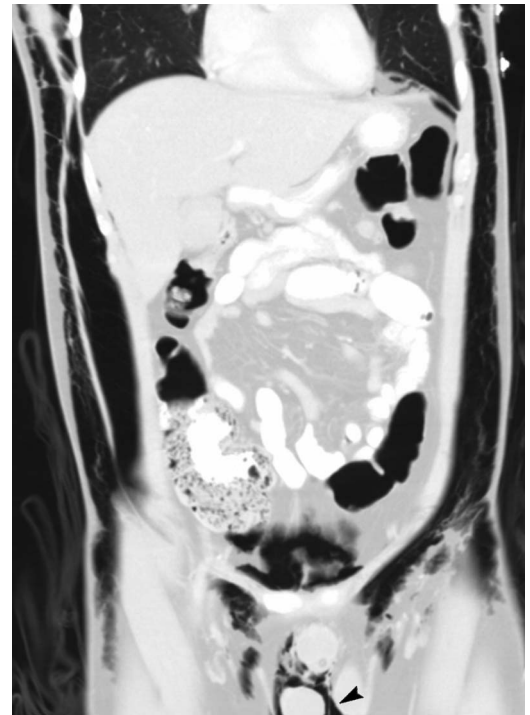
A 46-year-old man, with history of asthma without regular medication, presented with persistent dyspnoea and wheezes. He received endotracheal intubation with conventional ventilator support for acute respiratory failure with severe acidosis. Acute



**Figure 1** Coronal chest CT showing pneumomediastinum (long arrow) and subcutaneous emphysema (short arrow).



**Figure 2** Axial abdominal CT showing pneumoperitoneum (asterisk).



**Figure 3** Coronal abdominal CT showing pneumoscrotum (arrowhead).

desaturation developed on the next day. The following thoracic and abdominal CT disclosed severe subcutaneous emphysema (figure 1, short arrow), pneumomediastinum (figure 1, long arrow), pneumoperitoneum (figure 2, asterisk) and even pneumoscrotum (figure 3, arrowhead). After aggressive treatment with systemic steroids, the endotracheal tube was extubated 3 days later in a highly improved condition. The patient was discharged uneventfully, and had regular outpatient visits.

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