

PP014 A LEAKING AND BLEEDING PLEURA: RARE BUT LETHAL!

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INTRODUCTION

Spontaneous hemo-pneumothorax is a rare clinical entity. Approximately 5% of patient with pneumothorax will have concomitant hemothorax. The bleeding usually results from a torn adhesion between parietal and visceral pleura followed by ruptured of vascularised bullae.

CASE REPORT

We present a case of a 27-year-old gentleman with underlying idiopathic scoliosis who visited to our Emergency Department after developed sudden onset of severe back pain associated with difficulty breathing while sleeping. Physical examination revealed a well oriented male in respiratory distress with normal vital signs. Air entry was reduced over left lung on auscultation. Chest radiograph demonstrated left hydropneumothorax. An emergency tube thoracostomy was performed and drained total of 1.2 litre of blood. His haemoglobin level dropped from 11.3g/dl to 9.7g/dl and required 2 pints packed cell transfusion. He was then admitted to chest ward and planned for further investigation.

DISCUSSION AND CONCLUSION

Spontaneous hemo-pneumothorax is defined as pleural fluid with haematocrit greater than 50% of the patient's blood in the absence of trauma or other causes. In cases of long standing hemothorax haematocrit level can be lower due to hemodilution, thus mimicking hemorrhagic exudation. Patient may develop massive hemothorax which leads to hypovolemic shock as the presence of pneumothorax hinders the tamponade

effect from the lung. Thus, treatment of spontaneous hemo-pneumothorax includes initial resuscitation measures and transfusion of blood products along with chest tube insertion for drainage of hemothorax and lung re-expansion. In haemodynamically unstable patients, early surgical interventions are recommended. Although rare, diagnosis of spontaneous hemo-pneumothorax should be considered as an infrequent cause of sudden onset of chest pain and breathlessness in young adults with radiographic findings of hydropneumothorax. Early thoracotomy is the preferred treatment in spontaneous hemothorax as bleeding from torn adhesion commonly unsettled with conservative management.