



# His Organ Is Not In Place, Chest X-Ray Might Help!

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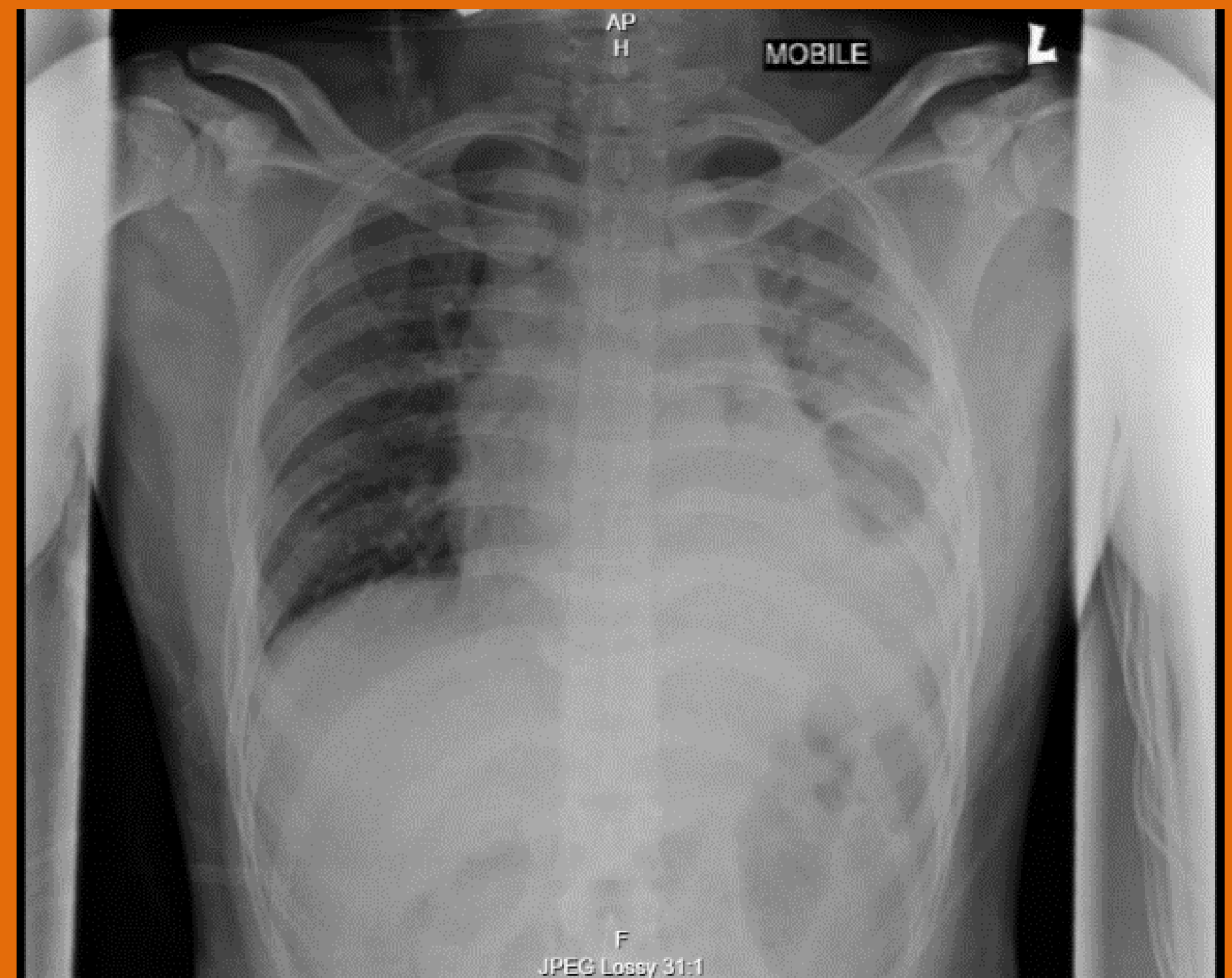


## Introduction :

Traumatic diaphragmatic injury may occur following blunt or penetrating trauma. The commonest cause for blunt trauma is road traffic accident (RTA). Delayed in diagnosis will increase the morbidity and mortality for the patient. Even though chest x-ray is known to be unreliable in diagnosing traumatic diaphragmatic rupture due to its low sensitivity and specificity but it is one of the most accessible and useful imaging modality.

## Case description:

We had a young gentleman presented to our ETD following an RTA. He was driving a car and had a head-on collision with another car that killed his colleague instantaneously. He had stable vital signs except for tachycardia. Primary survey revealed reduced air entry on the left side of the chest which was initially suspected to be pneumothorax or haemothorax.



Hence portable chest x-ray was done but noted elevated left dome of hemidiaphragm without evidence of pneumothorax or haemothorax. CT chest was urgently performed and confirmed the diagnosis of left diaphragmatic rupture with stomach and omentum herniated into the left thoracic cavity. Trauma team proceeded with emergency exploratory laparotomy and noted 7cm horizontal tear extending to crus of diaphragm with stomach herniated to left thoracic cavity. Patient was doing well on follow up.

## Conclusion:

Post-traumatic diaphragmatic hernia is not an uncommon sequel. Lack of awareness of this diagnosis may result in life threatening complications. CT scan is the investigative tool of choice but chest radiography, despite it's various technical limitations , it still remains a quick, cheap and valuable technique in an emergency setting to detect diaphragmatic rupture.

## References:

R. Hajong, A. Baruah, Post traumatic diaphragmatic hernia, Indian J Surg. 2012 Aug; 74(4): 334-335