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Title: Diffuse alveolar haemorrhage and pneumomediastinum after hypoglycaemic seizure

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Body: Diffuse alveolar haemorrhage is a potentially life threatening condition. Given the multitude of possible etiologies and the infrequency with which it is encountered, diffuse alveolar haemorrhage poses a formidable diagnostic challenge. A 29 year old insulin-dependent diabetic man presented to the local emergency department with a 3 hour history of frank haemoptysis after a nocturnal hypoglycaemic seizure. Chest x-ray showed mid-lung predominant bilateral airspace disease. Computed tomography of the chest demonstrated pneumomediastinum and bilateral patchy ground glass opacities in a bronchovascular distribution. Bronchoalveolar lavage of the lingula returned consistently bloody returns with haemosiderin-laden macrophages. Work-up for secondary causes of diffuse alveolar haemorrhage including infection, vasculitides and connective tissue disease were negative and the haemoptysis resolved without any immunosuppressive therapy within 24 hours. Follow-up chest x-ray demonstrated marked interval improvement in the bilateral airspace disease. Previous reports have described post-ictal neurogenic pulmonary oedema but ours is the first description of seizure-induced alveolar haemorrhage with pneumomediastinum. This suggests that this condition may result from high intrathoracic pressures during a seizure leading to barotrauma and subsequent alveolar haemorrhage.