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Title: Spontaneous pneumomedistinum & subcutaneous emphysema in idiopathic pulmonary fibrosis (IPF) with bronchial wall leak

Dr. Chintan 2407 Patel chopra10@hotmail.com MD [1], Dr. Ram 2408 Chopra chopra10@hotmail.com MD [1], Dr. Vaibhav 2409 Pandharkar chopra10@hotmail.com MD [1], Dr. Anand 3603 Yannawar chopra10@hotmail.com MD , Dr. Jaymala 3604 Gaikwad chopra10@hotmail.com MD , Dr. Manisha 3605 Bhosle chopra10@hotmail.com MD and Dr. Sharad 6333 Patil chopra10@hotmail.com MD . [1] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 ; [2] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 ; [3] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 ; [4] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 ; [5] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 ; [6] Pulmonary Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 and [7] Pulmonar Medicine, Ruby Hall Clinic, Pune, Maharashtra, India, 411001 .

Body: Spontaneous pneumomediastinum & subcutaneous emphysema in IPF is due to alveolar rupture but air leak due to bronchial rupture is rare.We present unique case of bronchial leak seen on bronchoscopy in a patient of IPF. Non traumatic subcutaneous & medistinal emphysema due to bronchial rupture in IPF is rare & is being reported for the first time Case report-55 years male admitted with severe progressive dyspnoea & dry cough of 1 month. Massive subcutaneous emphysema was seen on chest, neck & arms. CT thorax showed pneumomedistinum & IPF in lower lobes.

Put on steroids & 100% O2 but no relief. Bronchoscopy showed air bubbles oozing from irregular opening near superior segment of left lower lobe.

Glue was applied to seal bronchial wall leak & to our amaze subcutaneous emphysema started regressing with clinical improvement. Repeat CT scan showed decrease in mediastinal air. Discussion-Bloomberg considered the cause of non traumatic subcutaneous & mediastinal emphysema to be due to weakness of either alveolar or bronchial wall. Air escapes via bronchovascular channels to mediastinum & subcutaneous tissues, described as Maclin effect.