

Subcutaneous emphysema: a rare complication of dental extraction

A 40-year-old man presented to hospital following an episode of central chest pain, described as being like ‘a kick to the chest’. There was no associated shortness of breath, diaphoresis or palpitations and the pain resolved spontaneously before presentation. He was a non-smoker, occasional drinker and had no significant past medical history, but he had had a wisdom tooth extracted on the left hand side 24 hours earlier. On admission, there was swelling of the left jaw and neck with crepitus on palpation. Physical examination was otherwise normal. Electrocardiogram and blood tests, including troponin levels, were normal. Chest X-ray (**Figure 1**) demonstrated small volume pneumomediastinum and surgical emphysema in the neck, more marked on the left. Although rare, iatrogenic subcutaneous emphysema associated with dental extraction occurs when the air from the high-speed dental handpiece is forced into the soft tissue through the reflected flap. The patient was reviewed by the maxillofacial team and made an uneventful recovery.

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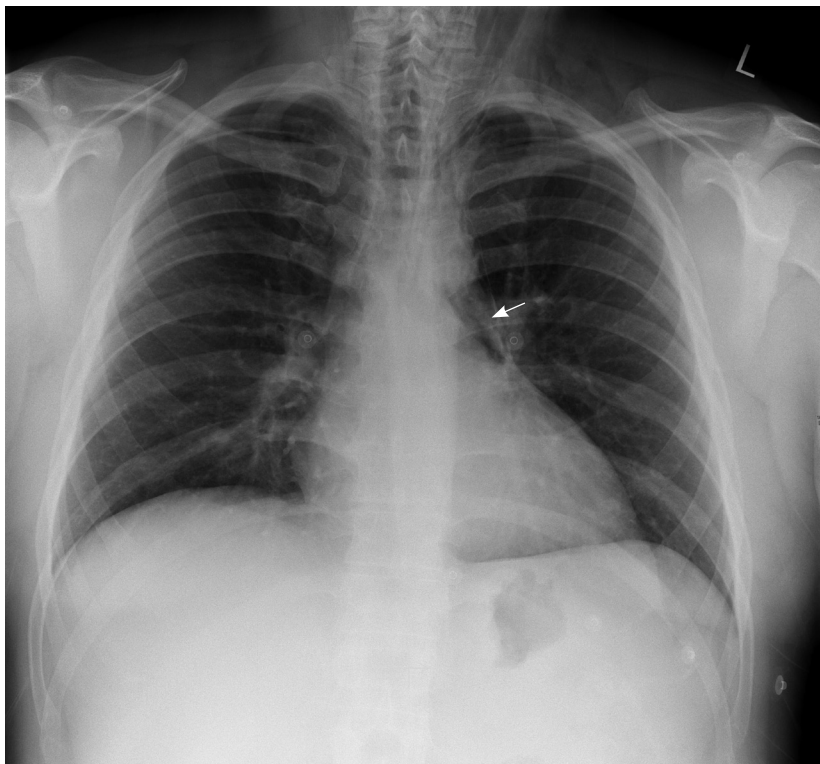


Figure 1. Chest X-ray illustrating a small pneumomediastinum (arrow), along with surgical emphysema in the neck, more marked on the left.

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