

Clarify whether the patient has a pneumothorax or pseudopneumothorax before intervention

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A 84-year-old man presented with a complaint of left chest pain and dyspnoea for several days. An appearance suggestive of pneumothorax and pleural effusion resulting from congestive heart failure was detected on the posteroanterior chest X-ray. Pseudopneumothorax was suspected, so the patient underwent thoracic computed tomography imaging (Figure 1). This showed that the patient did not have a pneumothorax, so an unnecessary procedure was prevented.

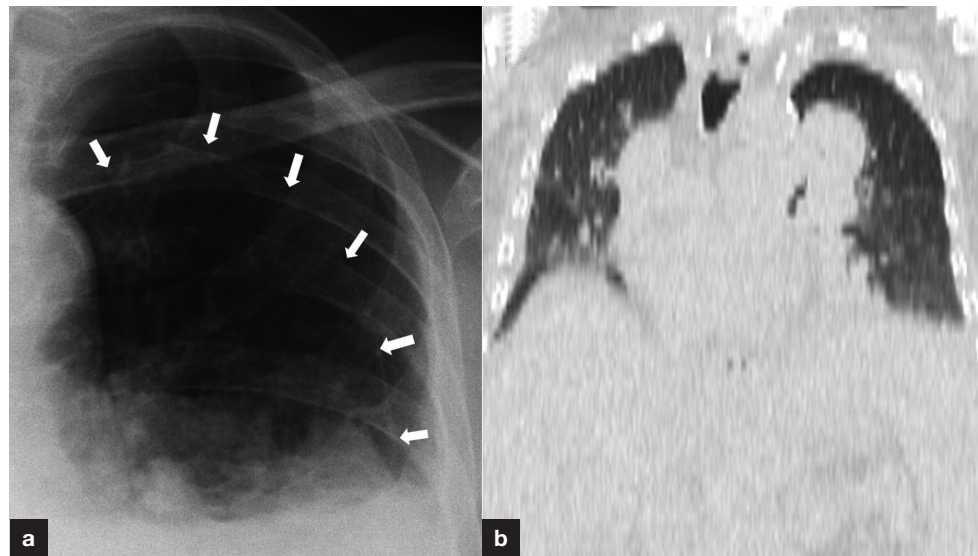


Figure 1. a. Posteroanterior chest X-ray showing a suspicious pneumothorax appearance on the left hemithorax (arrows). b. Coronal computed tomography scan confirming the absence of pneumothorax.

Direct X-rays may give the appearance of a pseudopneumothorax, especially as a result of skin folds in older patients (Kishimoto et al, 2018). Sometimes, this can lead to an unnecessary, invasive procedure being performed in these cases (Niazi et al, 2018). Confirmation with thoracic computed tomography should be performed in cases where pseudopneumothorax is suspected to prevent unnecessary intervention.

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How to cite this article:

Aydin Y, Ogu H, Ulas AB, Eroglu A. Clarify whether the patient has a pneumothorax or pseudo-pneumothorax before intervention. *Br J Hosp Med.* 2022. <https://doi.org/10.12968/hmed.2021.0616>