

Images in cardio-thoracic surgery

## Pneumopericardium—complication of an unknown tuberculosis in a HIV positive patient

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A 15-year-old male, diagnosed with acute serous pericarditis, then with pneumopericardium in another clinic, presents with a 3-week cough history. He showed no signs of cardiac tamponade. There were performed pericardial drainage and biopsy (subxifoidian approach under local

anesthesia). After surgery he received antituberculous drugs in another center (Figs. 1 and 2).

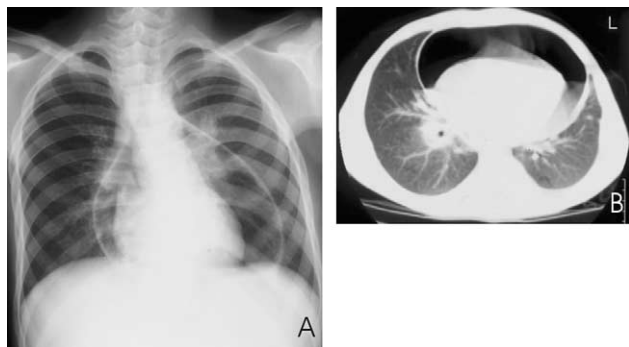


Fig. 1. (A) PA chest X-ray shows the upper delineation of the aerial image just under the level of the aortic arch, ruling out pneumomediastinum. The likely explanation of this aerial collection is Macklin effect, intraoperative endoscopy excluding a bronchopleural fistula. (B) CT scan reveals pneumopericardium, a minimal pleuropericardial effusion and parenchymatous consolidation surrounding the right lower lobe bronchus. In the pericardial fluid, AFB and positive HIV serology were found.



Fig. 2. Postoperative PA chest X-ray demonstrates the complete evacuation of the pericardial collection.

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