Iatrogenic pneumopericardium

İatrojenik pnömoperikardiyum

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An 85- year- old women presented with dyspnea, fatigue, dizziness and palpitation. An electrocardiogram showed atrial fibrillation with a ventricular rate of 110 / min irregularly irregular rhythm and ST-T wave changes. The chest radiograph showed cardiomegaly (Fig. 1). An echocardiographic examination showed normal left ventricular systolic function, grade 1 tricuspid regurgitation and pericardial effusion (anterior wall: 25 mm, apex: 20 mm, posterior wall: 18 mm). The pericardiocentesis was

performed. The pericardial fluid was transudative in nature. Repeat chest radiograph showed a new lucent outline of the heart (Fig.2). The air can be seen circumferentially around the heart and most importantly beneath the heart in Fig 1 (without this latter finding only a diagnosis of pneumomediastinum can be made). Because of the leakage in drainage system a pressure pneumopericardium developed. This was the iatrogenic cause of pneumopericardium. She was treated conservatively.



Figure 1. The chest radiograph showing cardiomegaly



Figure 2. The chest radiograph showing a new lucent outline of the heart (the air circumferentially around the heart) representing pneumopericardium