

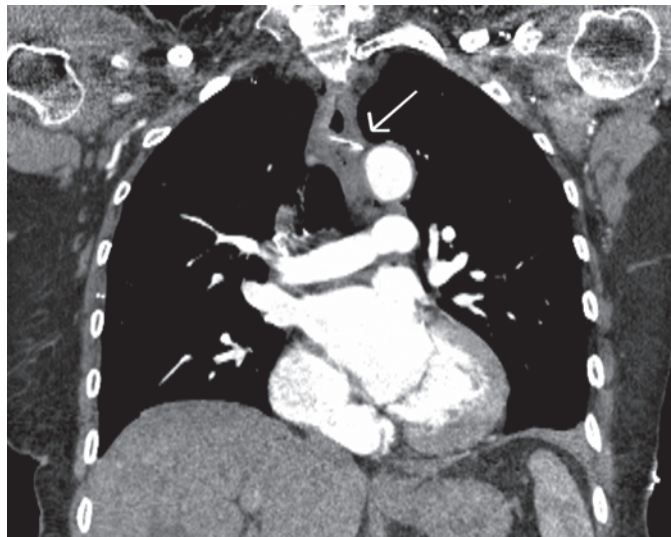
A chicken bone pneumothorax?

A 66-year-old woman presented to the emergency department with sudden-onset, severe thoracic back pain associated with dyspnoea and diaphoresis after consuming lunch. She was otherwise well, and her only medical history of note was gastro-oesophageal reflux disease.

Examination showed a large right-sided pneumothorax, which was confirmed by chest x-ray. A pleural catheter was inserted, which resolved the pneumothorax, but the patient's pain continued.

A computed tomography scan showed a 2.7 cm transverse, linear foreign body in the patient's oesophagus at the level of the aortic arch (Figure, arrow). This had caused perforation, pneumothorax, pneumomediastinum and pneumopericardium.

The chicken bone was removed surgically, and the patient made an uneventful recovery.



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