
Abstract

Subcutaneous emphysema (SE) and pneumomediastinum can be spontaneous or traumatic in origin. Spontaneous SE involving cervical, parapharyngeal, mediastinal, pericardial, and pleural space together is rare, while epidural pneumatosis is an even rarer entity. We report a previously healthy teenage male with sudden onset chest pain whose plain radiographs and high-resolution computed tomography (HRCT) showed extensive spread of air in the mediastinum, pericardial space, pleural space, and epidural space. He was hemodynamically stable and had a spontaneous recovery after one week. Follow-up radiological imaging showed complete radiological resolution of gas lucencies.

It is quite important for clinicians to be aware of this condition, common and rare routes of extension, and possible complications. Clinical suspicion is vital to plan appropriate investigations especially radiological modalities such as chest X-ray and HRCT. This will help in evaluating the severity of the condition, exclude possible etiologies, and look for potential complications so that proper management and follow-up can be planned.