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Clinical Image

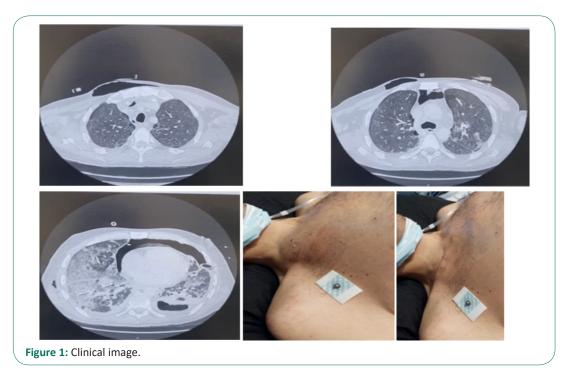
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Take a breath: Clinical image

Rita Leite Cruz¹*; Sara Machado² ¹São José Hospital, Portugal. ²Hospital Curry Cabral, Portugal.

*Corresponding Author: Rita Leite Cruz São José Hospital, Portugal. Email: anaritaleitecruz@gmail.com

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Description

A 34-year-old man with no relevant past medical history except for cannabinoid daily abuse, presented to our intensive care unit from an outside hospital with Ludwig's angina that progressed to descending necrotizing mediastinitis. On examination there was a dynamic air collection at the level of the right anterior chest wall consistent with pneumomediastinum communicating with pneumothorax. He also presented with bilateral empyema in need of intervention by thoracic surgery, with debridement of the pleura, lung and anterior mediastinum to the pleura with drainages, and also a cervicotomy immediately above the sternal manubrium with debridement of that region towards subcutaneous infraclavicular location and the anterior mediastinum communicating the cervicotomy with the thoracotomy. The surgical approach combined with adjuvant antibiotic therapy made the outcome favorable.