## The many faces of tension pneumothoraces

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Correspondence to: Dr Tora Leong, Department of Medicine, Our Lady's Hospital, Navan, County Meath, Ireland toraleong@gmail.com Figure A shows a left-sided tension pneumothorax with the classically described mediastinal and tracheal shift in a man aged 58 years who had an 18 week history of pulmonary tuberculosis. Figure B shows a right-sided basal pneumothorax in a man aged 84 years. The right hemidiaphragm is depressed and mediastinal shift to the left has occurred. Clinical features included worsened dyspnoea against a background of emphysema and a chronic right apical pneumothorax. Figure C (left) shows a

left-sided pneumothorax in a woman aged 72 years. Although this patient did not have tracheal shift, tachycardia, or hypotension, the chest radiograph showed features of a tension pneumothorax—scalloping and depression of the diaphragm—which resolved after chest tube insertion (figure C [right]). While acknowledging that emergent needle decompression should always take place, these images show features of tension penumothoraces, often described, but thankfully not always seen.



Figure: Radiographic appearance of tension pneumothoraces
(A) Left-sided tension pneumothorax. (B) Right-sided basal pneumothorax. (C) Left-sided pneumothorax (left) before and (right) after insertion of chest tube.