



## Case illustrated

## Spontaneous Pneumothorax Following COVID-19 Pneumonia

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## ABSTRACT

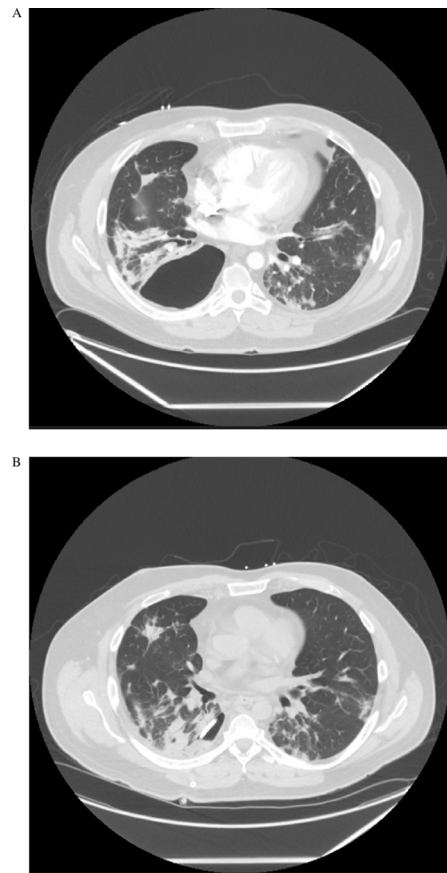
Patient presents with dyspnea after recovering from COVID-19 pneumonia and is found to have pneumothorax. This represents an under-reported sequelae of COVID-19.

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A 50-year-old man who developed COVID-19 pneumonia in late April 2020 treated with supportive measures and supplemental oxygen was recovering at home when he developed acute onset shortness of breath in late May. CT angiography was performed due to concern for pulmonary embolism. It revealed diffuse ground-glass opacities throughout the chest from prior COVID-19 pneumonia and also demonstrated a ten centimeter loculated posterior right pneumothorax as shown above (Fig. 1). A chest tube was placed and the patient immediately noted an improvement in dyspnea (Fig. 1). To our knowledge, this is the first report in the literature of pneumothorax as late sequelae of COVID-19.

Written informed consent was obtained from the patient for publication of this case report and

accompanying images. A copy of the written consent is available for review by the Editor-in-Chief of this journal on request.



**Fig. 1.** Panel A: CT angiography revealing large loculated posterior pneumothorax and groundglass opacities consistent with prior COVID-19 pneumonia. Panel B: CT chest after chest tube placement.

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