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## Spontaneous Pneumomediastinum: A diagnostic challenge in a patient presenting with excessive vomiting and neck swelling

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**Introduction**: Spontaneous Pneumomediastinum is defined as free air in the mediastinum without any apparent cause after more serious causes such as iatrogenic injuries or infections by gas-producing bacteria have been excluded. This condition was first officially described by Dr. Louis Hamman in 1939 and hence is also known as Hamman's syndrome. It has been reported in many patient populations, most commonly in the 14-35 years' age group and runs a benign course.

Case Report: A 33-year-old man presented with neck swelling after excessive vomiting following alcohol intake. Examination revealed subcutaneous emphysema without chest pain or respiratory distress. Initial tests showed raised WBC, neutrophils, CRP, and imaging confirmed Pneumomediastinum with a suspected esophageal tear. A diagnosis of Boerhaave syndrome was considered, and he received aggressive supportive care, including IV fluids, antibiotics, and monitoring. Further imaging showed no esophageal perforation, leading to a revised diagnosis of Hamman's syndrome (spontaneous Pneumomediastinum). After tolerating a light diet and clinical improvement, he was discharged with advice to return if symptoms worsened. No follow-up was planned.

**Conclusion**: In summary, Hamman's syndrome, although often initially misdiagnosed due to its symptom overlap with more serious conditions like Boerhaave syndrome, is a benign and self-limiting condition. Prompt recognition and appropriate conservative management can lead to excellent outcomes, avoiding unnecessary invasive procedures and prolonged hospital stays.

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