



# PNEUMOMEDIASTINUM AND SUBCUTANEOUS EMPHYSEMA AS COMPLICATIONS OF MEASLES

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This study is : Meets the exemption criteria for MSF ERB review and has  
ethical approval & consent for the photos use

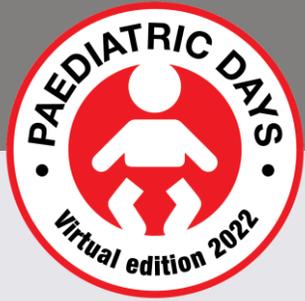




# Case Description

- 8-year-old boy
- Presenting complaint: Fever and measles rash.
  - Neck swelling and eyelid oedema 1 week after the appearance of rash.
- History: Unimmunised. 2 siblings also diagnosed with measles.





# Examination

- Respiratory distress: Tachypnoea, intercostal recession.
- Oxygen sats 94 % in air.
- Subcutaneous crepitations on palpation
- Swelling progressed -> face, upper limbs, chest and scrotum.
- No signs of malnutrition.



# Chest x-ray

- Extensive subcutaneous emphysema and signs of pneumomediastinum





# Management and Progress

- Oxygen (increasing saturation to 100%)
- Drained- simple percutaneous needles decompression done at the ER.
- Ampicillin 150 mg/kg/day and cloxacillin 200 mg/kg/day for 2 weeks.
- He improved progressively and was discharged on day 14.



# Discussion

- Over a period of three months, 80 cases of measles were treated at our hospital.
- X1 case only of pneumomediastinum and subcutaneous emphysema.
- Little evidence on this complication- 6.4% incidence reported, risk factors malnutrition and <5 years of age.
- This is a rare complication of Measles which could be avoided by vaccination.
- This case is another example of the importance of vaccination to prevent avoidable causes of childhood morbidity and mortality.



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