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A Case of Survival with Self-Draining Haemopericardium Secondary to Stabbing

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Abstract : A 16 year old male was found collapsed on the road following stab injuries to the chest and abdomen and was transported to the emergency department by ambulance. On arrival in the emergency department the patient was breathless and appeared pale. He was maintaining his airway with spontaneous breathing and had a heart rate of 122 beats per minute with a blood pressure of 83/63 mmHg. He was resuscitated initially with three units of packed red cells. Clinical examination identified three incisional wounds each measuring 2 cm. These were in the left para-sternal region, right infra-scapular region and left upper quadrant of the abdomen. The chest wound over the left parasternal area at the level of 4tth intercostal space was bleeding intermittently on leaning forwards and was relieving his breathlessness intermittently. CT imaging was performed to characterize his injuries and determine his management. CT scan of chest and abdomen showed moderate size haemopericardium with left sided haemopneumothorax. The patient underwent urgent surgical repair of the left ventricle and left anterior descending artery. He recovered without complications and was discharged from the hospital. This case highlights the fact that the potential to develop a life threatening cardiac tamponade was mitigated by the left parasternal stab wound. This injury fortuitously provided a pericardial window through which the bleeding from the injured left ventricle and left anterior descending artery could drain into the left hemithorax providing an opportunity for timely surgical intervention to repair the cardiac injuries.

Keywords : stab, incisional, haemo-pericardium, haemo-pneumothorax
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