

Respiratory Medicine

Insert patient details/patient sticker

Date of pneumothorax

Pneumothorax

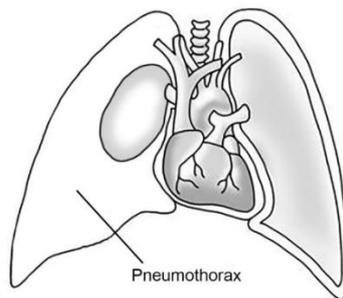
Information for patients going home

Introduction

This leaflet explains what a pneumothorax is and how it is managed. Please feel free to ask our team any questions you have about the information below.

What is a pneumothorax?

A pneumothorax is an abnormal collection of free air in the chest, caused by the escape of air from the outer part of the lung. It commonly causes pain in the chest and breathlessness. The pain is typically sharp, worse with deep breathing, and can start suddenly.



Why do I have a pneumothorax?

There are several causes of a pneumothorax, the most common of which is smoking. Other causes include underlying lung diseases such as emphysema, and inherited conditions. Sometimes a pneumothorax is caused by injury to the chest. When not related to injury, a pneumothorax often occurs unexpectedly with no obvious trigger. It probably relates to a localised weakness in the lung.

What happens next?

Given that your condition is safe and stable, the doctors have decided to discharge you.

Your lungs should slowly absorb any remaining air trapped in the chest, but this can take several weeks.

Any symptoms you still have should therefore continue to improve.

However, if your symptoms get worse YOU MUST RETURN TO A&E IMMEDIATELY. The pneumothorax may be getting larger. This is uncommon.

Until the pneumothorax has completely disappeared YOU MUST NOT TRAVEL BY AIR. If you are intending to fly, you must have a further chest x-ray to check the lung has returned to normal. Air travel is not safe until at least one week after this point.

Could this happen again?

Having had a pneumothorax, you are now at a higher risk of pneumothorax in the future. If you ever experience similar symptoms again, please attend your local A&E. If you have had more than one pneumothorax, there are treatments for preventing further episodes. Such treatments include surgery.

We strongly advise you not to smoke. There is strong evidence that smoking makes a further pneumothorax more likely.

You must never scuba dive unless you have had surgery to fix the pneumothorax and you have had confirmation that the surgery was successful. The consequences of another pneumothorax when swimming deep underwater could be fatal.

How to contact us

You will be contacted to attend a follow-up clinic with the pleural team.

If you do not receive an appointment or if you have any questions or concerns leading up to your follow-up appointment, please contact the Pleural Team on 07876138418 or imperial.pleural@nhs.net (Monday-Friday, 09.00-17.00).

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777** (10.00 – 16.00, Monday to Friday). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street
London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:
imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

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