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A rare complication of *Bordetella pertussis* infection Una complicación rara de la infección por *Bordetella pertussis*

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Figure 1

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A 65-year-old man was admitted with a two-week history of dry cough, coughing fits and worsening left thoracic pain. He showed respiratory failure and subcutaneous emphysema of the face, neck, and chest. CT scan (Fig. 1A and B) revealed subcutaneous emphysema, pneumomediastinum, left pneumothorax, and parietal pleura detachment. Despite high-flow oxygen (FiO₂ 100%), PaO₂/FiO₂ dropped from 391 to 97 in two days, and emphysema extended to the abdomen and groin. Veno-venous extracorporeal membrane oxygenation (VV-ECMO) was initiated to avoid intubation due to a suspected bronchotracheal leak. Polymerase chain reaction (PCR) for *Bordetella pertussis* was positive, and azithromycin was started. The patient recovered fully after five days on VV-ECMO. Given the current global whooping cough outbreak, *B. pertussis* should be considered in adults with compatible symptoms.

CRediT authorship contribution statement

All authors contributed to conceptualization, methodology, writing, review and edition of this article. All authors discussed the results and contributed to the final manuscript. All authors have read and agreed to the published version of the manuscript.

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Declaration of competing interest

The authors declare no conflicts of interest.