Post-traumatic interventricular communication as a life-threatening late complication of a penetrating chest injury

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A 65-year old woman underwent an exploratory right thoracotomy for haemopneumothorax (Fig. 1) after penetrating chest trauma (double-stabbing). Operative findings included a 1-cm pericardial lesion associated with an apparently superficial wound of the right ventricle (without significant signs of active bleeding and treated with direct suture) and moderate intercostal bleeding. Respiratory failure occurred on the fourth postoperative day. CT scan showed an interventricular communication (Fig. 2) and the patient underwent successful surgical repair (endocardial patch technique) of this defect under total cardiopulmonary bypass.