Spontaneous Thoracic Aortic Pseudoaneurysm Treated with Endovascular Grafting in a Hemodialysis Patient

Bir Hemodiyaliz Hastasında Endovasküler Greftleme ile Tedavi Edilen Spontan Torasik Aort Yalancı Anevrizması

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Thoracic aortic injuries result in pseudoaneurysm formation in 1%-2% of cases if unrecognized. Spontaneous cases are very rare (1). Treatment strategy has shifted from surgery towards endovascular techniques, but use is limited with specific anatomical considerations and complications. Particularly in high risk patients, endovascular approach offers lower morbidity and mortality (2,3).

A 51 year-old male patient with renal failure experienced dyspnea during dialysis. Chest radiogram revealed massive left-sided pleural effusion. Thoracic computerized tomography documented pseudoaneurysm in thoracic aorta distal to left subclavian artery (48.5x29.1 mm) (Figures 1, 2). There was no history of trauma or percutaneous/surgical intervention; possibly the atherosclerotic plaque weakened the wall and lead to aortic rupture during a hypertensive attack and pseudoaneurysm developed. Successful endovascular treatment was performed (Figure 3). Left hemithorax was tube-drained after the procedure (defibrinated blood), because preceding intervention could decompress the pseudoaneurysm sac and lead to rupture. The postoperative course was uneventful.

Key Words: Aorta, thoracic; aneurysm, false; renal insufficiency; endovascular procedures
Anahtar Kelimeler: Aort, torasik; anevrizma, yalancı; böbrek yetmezliği; endovasküler prosedürler

CONFLICT of INTEREST
The authors reported no conflict of interest related to this article.

REFERENCES

Figure 1. Computerized tomography revealed thoracic aortic pseudoaneurysm formation with dimensions of 48.5x29.1 mm (arrow) in thoracic aorta distal to the left subclavian artery origin. There was massive pleural effusion in left hemithorax.

Figure 2. Three dimensional reconstruction of thoracic aorta clearly demonstrated the pseudoaneurysm formation (arrow).

Figure 3. Intraoperative angiography showed successful exclusion of the pseudoaneurysm sac by endovascular stent grafting.