

Physician - Peripheral Artery Diseases and Surgery/Percutan Interventions

[MEP-02]

A Buerger's Patient with Brachial Artery Aneurysm

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Cardiovascular Surgery and Interventions 2024;11(Suppl 1):MEP-02

Doi: 10.5606/e-cvsi.2024.mep-02

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Received: September 14, 2024 - Accepted: September 29, 2024

Thromboangiitis obliterans (TAO) is a chronic, inflammatory and thrombotic vascular disease associated with tobacco use. This report described a TAO patient who underwent an aneurysmectomy due to a brachial artery aneurysm (BAA), which is not one of the classic findings of TAO and has no example in the literature. A 49-year-old male patient presented with swelling and pain in the right arm. In 2021, the patient was diagnosed with TAO. On physical examination, a pulsatile mass extending from the antecubital region was observed. Ultrasonography revealed aneurysmatic enlargement and mural thrombus (Figure1). Brachial aneurysmectomy was planned. The cephalic vein graft was interposed between the brachial artery and the radial artery. There was no flow issue. No postoperative complications were observed. The patient was discharged on the second day. Pathological examination was evaluated as compatible with TAO. After three months, the patient had no symptoms. Usually, BAA occurs due to arteriovenous fistula, trauma, or idiopathic causes. The TAO-specific findings in the pathological examination in this case is rare for BAA. Furthermore, BAA may contain specific pathological findings for TAO, which may be considered an atypical clinical presentation. Smoking may be a common etiological factor for TOA and BAA.

Keywords: Arteritis, brachial artery aneurysm, smoking, thromboangiitis obliterans.

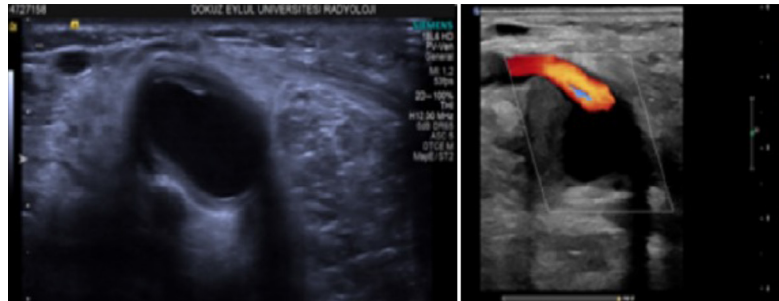


Figure 1. Aneurysmatic enlargement reaching a diameter of 15x25 mm in a segment of approximately 4 cm at the level of the brachial artery-radial artery junction in the right antecubital region.

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