

Giant thrombosed saccular aneurysm of the ascending aorta

Çıkan aorta dev tromboze sakküler anevrizması

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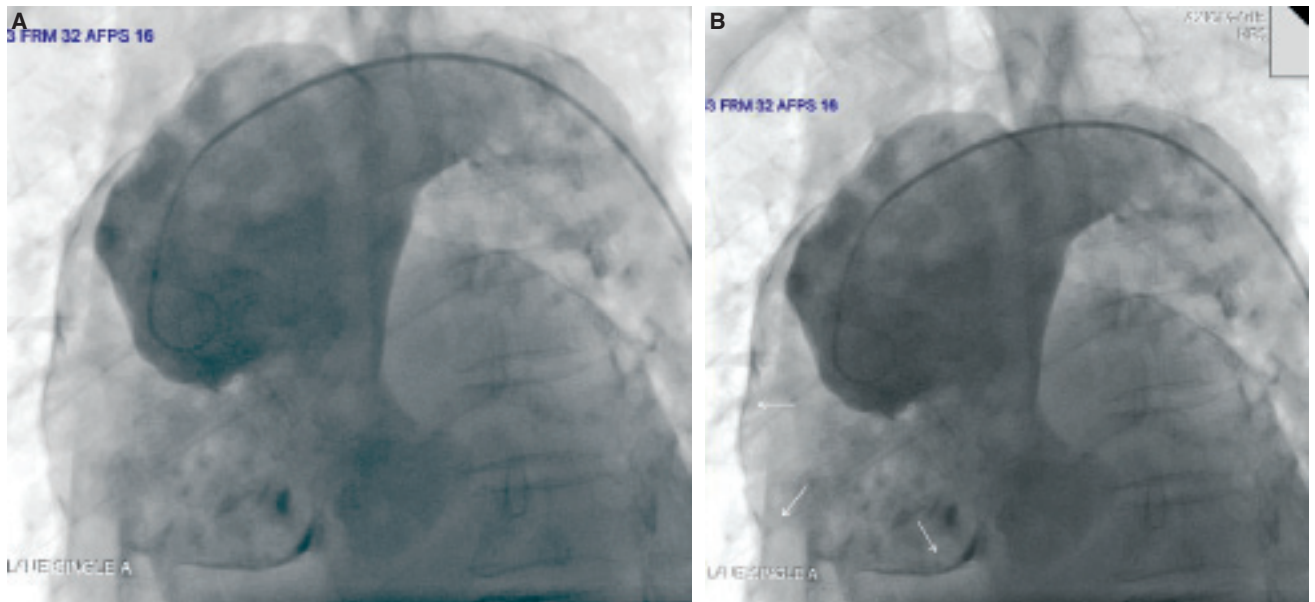
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A 74-year-old woman with a history of hypertension, heart failure, asthma, and amputated right arm (secondary to arterial thromboemboli) was admitted to

the emergency department with complaints of chest distress and dyspnea. She was normotensive and her heart rate was 76 bpm. On the physical examination, bilateral rales up to the mid zones of the lungs and grade III systolic murmur at the left sternal border and apex were heard. Electrocardiography showed QS pattern in anterior precordial derivations, and troponin-I level was 1.0 ng/ml (reference range: 0-0.6 ng/ml). Transthoracic echocardiography revealed valvular insufficiencies (moderate-to-severe tricuspid regurgitation, moderate mitral regurgitation and mild aortic regurgitation), biatrial dilatation, left ventricular hypertrophy, and systolic dysfunction (ejection fraction

[EF] was 40%, with segmental wall motion abnormalities at the apex and apical segments). On chest X-ray, congested lungs, increased cardiothoracic ratio, and dilated-calcified ascending and arcus aorta were detected. After admission to the coronary care unit, coronary angiography was performed, and a giant thrombosed saccular aneurysm of 120x50 mm was visualized (Fig. A, B). The aneurysm was limited to the ascending aorta (Video*). In addition, we detected several critical stenoses in coronary arteries. Although this giant aneurysm was detected incidentally, it is the most likely cause of her previous thromboemboli to the right arm that resulted in amputation. This giant aneurysm went undetected because the patient did not undergo computed tomography or conventional angiography during the first event. Because of the giant saccular aneurysm and multivessel disease of the coronary arteries, surgery was decided for the patient. As the patient refused surgery, no tomographic imaging was performed and she was discharged with medical therapy.



Figures– (A) Giant thrombosed saccular aneurysm is seen - without contrast. **(B)** Coronary angiography revealed a saccular ascending aortic aneurysm (measuring 120x50 mm) with a partially thrombosed section (arrows). Aortography showed giant thrombosed saccular aneurysm measuring 120x50 mm, which was limited to the ascending aorta. *Supplementary video files associated with this presentation can be found in the online version of the journal.