



CAROTID ARTERY PSEUDOANEURYSM RESULTING FROM PRIOR DACRON PATCH DEGENERATION: A CASE REPORT

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CTA NECK



INTRAOPERATIVE

Introduction:

83 y/o F PMH/PSHx CABG, HTN, HLD, severe right carotid stenosis s/p right CEA (22 yrs prior) who presented with swelling, erythema, pain to her right neck that started 3 weeks prior. Intermittently seen for ultrasound surveillance. Presented to PCP, CTA neck ordered with history of right CEA and prescribed course of oral antibiotics. CTA neck showed distal common carotid artery pseudoaneurysm measuring 3.1 x 3.6 cm.

Discussion:

Negative cultures question, possible pseudoaneurysm sterilization from antibiotic course.

Dacron patches documented to degenerate secondary to inflammation, less common cause than infection.

Management:

Referred to vascular surgery clinic, directly admitted. Blood cultures drawn. Underwent right neck exploration, right carotid artery pseudoaneurysm and in situ dacron patch resection, focal right carotid endarterectomy, repair with GSV interposition graft from ICA to CCA with patch angioplasty of the carotid bulb. Evidence of thrombus within pseudoaneurysm, no obvious infection. Cultures were taken from pseudoaneurysm site. All cultures negative. Discharged from hospital with outpatient US surveillance.

References:

Late Dacron Patch Inflammatory Reaction after Carotid Endarterectomy. Alawy, M. et al. European Journal of Vascular and Endovascular Surgery, Volume 54, Issue 4, 423 - 429.
Presentation and management of carotid artery aneurysms and pseudoaneurysms. Garg, Karan et al. Journal of Vascular Surgery, Volume 55, Issue 6, 1618 - 1622.