Images in cardio-thoracic surgery

Traumatic dissection of the innominate artery

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1. Case report

An 18-year-old male was admitted to the Trauma Center after a motor-cycle accident. He was unconscious with multi-system injuries, which included maxillary fracture, subarachnoid hemorrhage, bilateral lung contusions and third-degree burns of the right leg. An angiography, performed 14 days after the injury, revealed a localized traumatic dissection of the innominate artery (arrow) (Fig. 1). The arterial reconstruction of the innominate artery was not immediately performed because of the vicinity of the tracheotomy and a prolonged interval between the traumatic event and the establishment of the diagnosis, and also because of a very slow neurological recovery. The angiographic examinations performed 6 and 12 weeks later demonstrated no progression of the local findings and, therefore, we decided to postpone the arterial reconstruction until closure of the tracheotomy and clinical neurological improvement.

Fig. 1. Digital subtraction arteriogram of the supracaoortc trunks shows a localized traumatic dissection of the innominate artery (arrow).

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