

Impending rupture traumatic large pseudo aneurysm of V2 of vertebral artery: A successful hybrid approach and outcome

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Abstract

Vertebral artery aneurysms are rare clinical findings, representing 1% of supra-aortic aneurysms, and the most common cause of extra cranial vertebral artery aneurysms (EVAA) is penetrating neck trauma, but they can also occur secondary to dissection, atherosclerosis, infection, collagen vascular diseases, and inherited connective tissue disorders.. Extra cranial VA aneurysms are very uncommon accounting for 0.5% of all arterial aneurysms; they generally affect the most mobile segment, the V3 segment, followed by the V1 segment. The rupture of an EVAA can lead to catastrophic bleeding and pose a diagnostic and therapeutic challenge.VA injuries constitute less than 1% of all the vascular injuries and less than 1–6% of all the vascular injuries in the cervical region Penetrating vertebral artery injuries leading to serious external bleeding are rare and their injuries were previously missed prior to the routine use of angiography in diagnosing penetrating neck injuries. This frank hemorrhage was the impetus for the decision for operative exploration. Here, in our article we report the largest pseudo aneurysm reported in the literature. It was impending to rupture and arising from the second part of the right vertebral artery (V2) in a 23-years-old male. Duplex study and Urgent C.T angiography confirmed the presence of an extra cranial pseudo aneurysm involving the 2nd part of right VA, measuring10 cm ×7.5x4.8 cm. The Aim of this article is focusing and highlighting on a very rare vascular injury that any vascular or general surgeon could encounter throughout his daily work and highlighting the treatment options in emergency situations, putting into consideration the availability of different tools.

Biography

Khalid Abdelaziz Mowafy is presently working in Department of Vascular Surgery, Mansoura University. He attended several international and national conferences and workshops. He is a vascular surgeon, he is very interested in carotid artery diseases and intervention, he has experience in all aspects of vascular trauma, vascular accesses in CRF patients including pediatric vascular intervention, he also interested in deep venous incompetence reconstructive procedures, venous stenting Peripheral arterial diseases endovascular and open intervention. He had a great experience in vascular reconstruction and oncovascular procedures.



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