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RESEARCH ARTICLE

A GIANT AORTIC DISSECTED ANEURYSM: A CASE REPORT.

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Introduction:-

Giant aortic aneurysm is a rare clinical entity. It is defined as aneurysm in the aorta exceeding 10 cm in its maximum diameter.

Giant aneurysm can have various presentations. The most feared complications include dissection and rupture.

Case Presentation

- 1. A 45 years old woman, with no significant pathological history was admitted to the emergency department for chest pain, she experienced shortness of breath in the past four months she ignored.
- 2. On physical examination, there was a diastolic murmur in the aortic area. The heart rate was 98 beats/minute and blood pressure was 120/45mmHg. Rest of the examination was normal.
- 3. The X ray showed mediastinal widening (Figure 1). The transthoracic echocardiogram revealed a severely dilated proximal ascending aorta of 11.0cm in maximal diameter with well-defined dissection flap on either side causing severe aortic regurgitation with preserved left ventricular systolic function. Findings were confirmed with CT angiography.(Figure 2)
- 4. The patient was then admitted to the operating room and underwent Bentall procedure constituting reconstruction of ascending aorta, aortic valve replacement, and reimplantation of coronaries. (Figure 3-4)
- 5. The post operative course was uneventful.

Discussion:

The average rate of growth of thoracic aneurysm is 0.1-0.2 cm/ year. [1]

Since the risk of rupture is closely related to the size of the aneurysm, current guidelines recommend surgical intervention when the diameter of the aneurysm exceeds 5.5 cm. [2] The annual rate of rupture for aneurysms greater than 6 cm diameter is 14%. [3] Hence, a giant aortic aneurysm is not commonly seen in clinical practice.

Young patients, especially with no risk factors for cardiovascular disease, invariably have underlying genetic mutation. Hence, our patient was referred to a genetician for further investigations.



Figure 1:-Chest X-ray showing the mediastinal widening

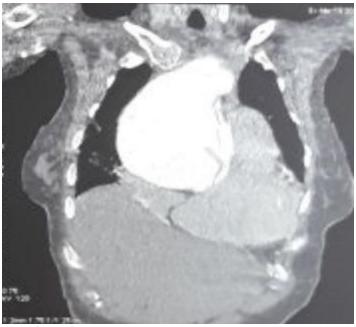


Figure 2:-CT angiography showing the aortic aneurysm



Figure 3:-Peroperatory pictures showing the Bentall procedure

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