

Radial Artery Pseudoaneurysm – A Case Report

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INTRODUCTION:

Pseudoaneurysm is a false aneurysm which does not include all three layers of the vessel wall. Following injury to the arterial wall, a sac of hematoma forms, which is contained by the adventitia or fibrous tissue in the surrounding parenchyma. The commonest cause is iatrogenic procedures, such as arterial catheterisation and percutaneous coronary procedures¹. The overall incidence is low (0.44%) and is usually associated with femoral artery. Pseudoaneurysm of the radial artery is extremely rare (0.009%)². Complications such as rupture, haemorrhage, distal emboli causing digital gangrene, and local compression of nerves can occur.

REPORT:

A 67-year-old lady presented with a painless swelling over her left wrist for two years. The range of motion of her wrist was full and sensation was intact. She was not on antiplatelet or anticoagulant. There was no prior history of significant trauma to her wrist or arterial catheterisation procedure. Examination revealed a firm swelling measuring 2x2cm over the anatomical snuffbox. It was non-pulsatile, mobile and non-tender. Distally, perfusion from the ulnar artery was adequate (Allen's test negative). Ultrasonography and computed tomography angiography confirmed a distal radial artery pseudoaneurysm.

Surgery was performed for the patient. Intraoperatively, there was a whitish pedunculated cyst over the dorsal branch of the radial artery. It was excised and the radial artery ligated. Distal circulation was confirmed intact prior to ligation. Histological examination revealed arterial lumen with thrombus within.

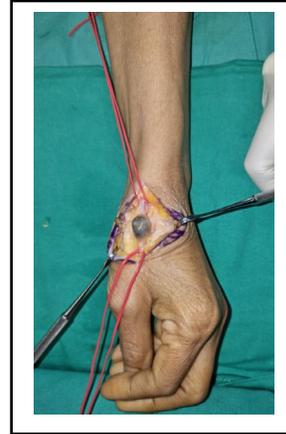


Figure 1:
Pseudoaneurysm over the wrist

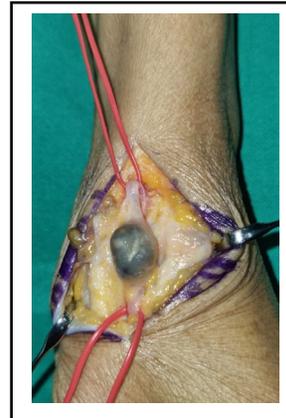


Figure 2: Cystic lesion arising from the dorsal branch of radial artery

CONCLUSION:

Radial artery pseudoaneurysm should be considered in the differential diagnosis of a mass around the wrist and hand, even in the absence of known direct trauma.

REFERENCES:

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