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Radiology

Arteria Lusoria: A Case Report

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Abstract Case Report

The arteria lusoria or right retro-oesophageal subclavian artery is the most common malformation of the aortic arch with a prevalence of 0.5-2.5%. It may be discovered in the face of symptoms of airway and/or oesophageal compression such as dyspnoea or dysphagia or even recurrent respiratory infections; but in most cases it is an asymptomatic condition as reported by several authors. We report the case of a 40 year old patient, in whom the thoracic CT scan performed in emergency following a thoracic trauma, allowed the fortuitous discovery of a retroesophageal aberrant artery.

Keywords: Arteria lusoria, laryngeal dyspnea, case report.

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Introduction

The arteria lusoria or retro-oesophageal right subclavian artery is the most common aortic arch anomaly, and may be associated with other congenital anomalies of the heart and large vessels, notably the bicarotid trunk, which is a common trunk giving rise to the two primary carotid arteries [1]. Left aortic arch with aberrant right subclavian artery or arteria lusoria is the most common aortic arch anomaly, with a prevalence of 0.5-2.5% [2]. Aortic arch anomalies are relatively common and account for 15-20% of all congenital cardiovascular diseases [3]. They may be discovered during symptoms of airway and/or oesophageal compression [3]; most cases are asymptomatic and are discovered incidentally [1]. We report a case of arteria lusoria discovered on CT scan in a 50-year-old patient

PATIENT AND METHOD

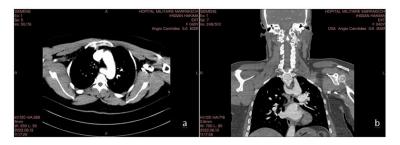
We report the case of a 40-year-old patient, in whom a chest CT scan performed in emergency

following a chest trauma, led to the incidental discovery of a retroesophageal aberrant artery [1]. Mediastinal window CT analysis APC in arterial time demonstrated the origin of a vessel from the aortic arch, crossing the midline, travelling retro-oesophageally and finally heading anteriorly and to the right to the right axillary region.

RESULTS

Clinically, the arteria lusoria is often asymptomatic, as in our case, since it does not form a complete ring around the oesophagus or the trachea, and is discovered in most cases incidentally during a thoracic exploration for other pathologies [1]. The origin of this artery is best visualised by cross-sectional imaging.

On CT scan (Figure a and b), it is a vessel that arises from the posterior aspect of the aorta, has a retrooesophageal course and ascends upwards and anteriorly in the axillary region.



CONCLUSION

Arteria lusoria is a rare vascular malformation that is often asymptomatic and discovered incidentally [1]. Its diagnosis should lead the radiologist to look for cardiac and large vessel anomalies.

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