

Aortocoronary Saphenous Vein Graft False Aneurysm, Closure with Amplatzer Device, First Case Reported

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Abstract

We report an interesting case with a rare aortocoronary saphenous vein graft false aneurysm. The closure was successfully percutaneous with Amplatzer device, until today July 2020.

Keywords: Aortocoronary; Saphenous Vein Graft; Aneurysm; Amplatzer Device

Introduction and Case Study

Saphenous vein graft aortocoronary aneurysms are rare complications of myocardial revascularization surgery. A 63-year-old female patient with a history of hyperlipidemia, arterial hypertension, and three-vessel coronary artery bypass graft, who is admitted for severe arterial hypertension, and unstable angina. ECG, Cardiac Doppler were performed; chest X-ray was observed, showing a right paracardiac mass, cardiac catheterization, Documenting coronary artery disease of three vessels, lad, CX, RCA, aortocoronary bypass to left anterior descending is occluded, bypass to the CX is occluded. Aortography shows a coronary artery aneurysm of the saphenous vein graft to right coronary artery, potential of rupture, fistula and infections. We talked about the case on which device we needed to use, coil or graft, and we decided to closure with Amplatzer. From femoral approach we used Guidant Catheter 9f. The aneurysm is cannulated with guide 0035, and the Amplatzer occluder device is placed with total closure of the aneurysm (Figure 1-8).

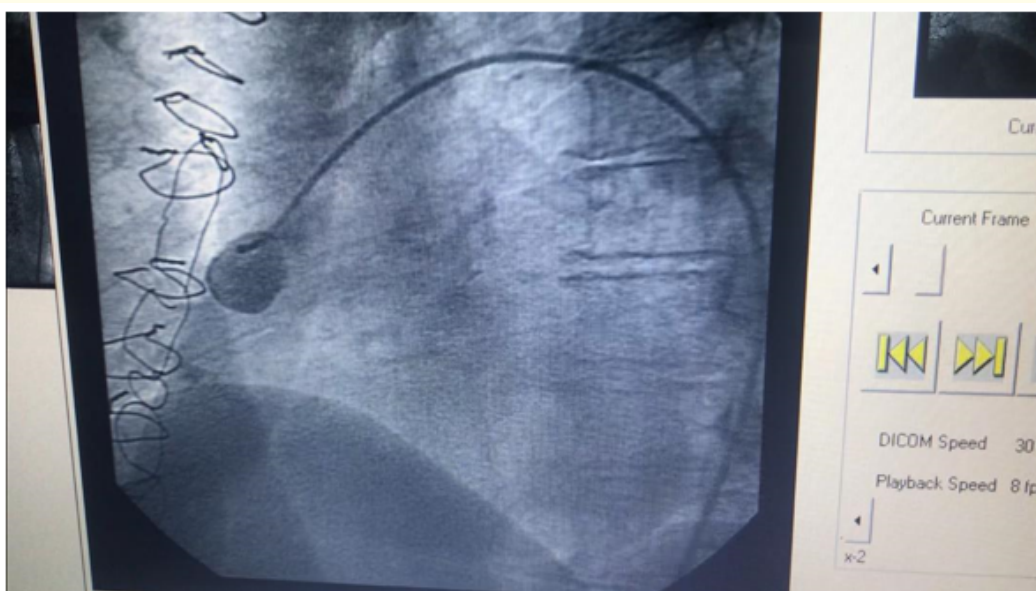


Figure 1

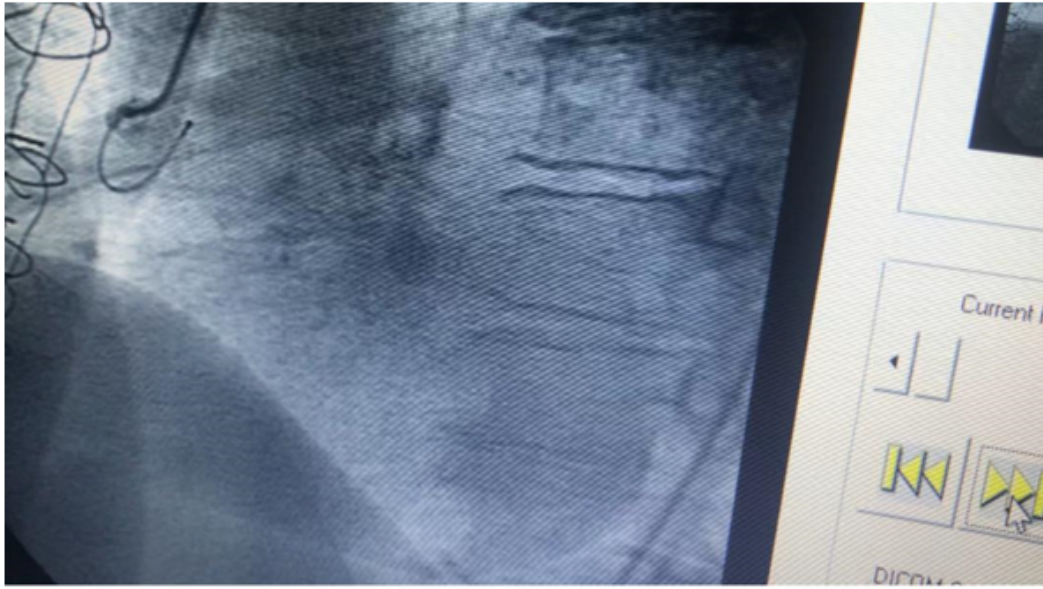


Figure 2

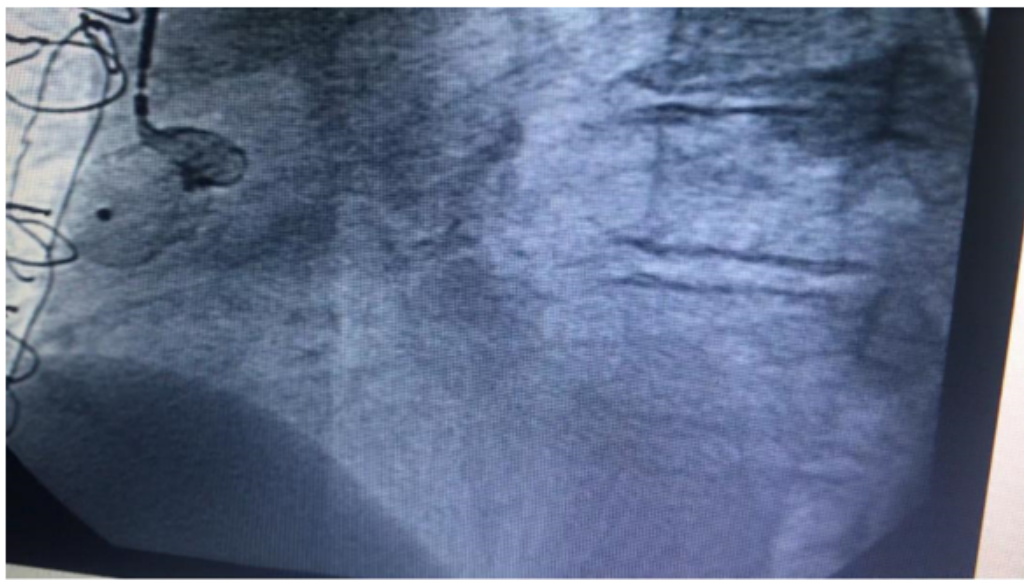


Figure 3



Figure 4



Figure 5

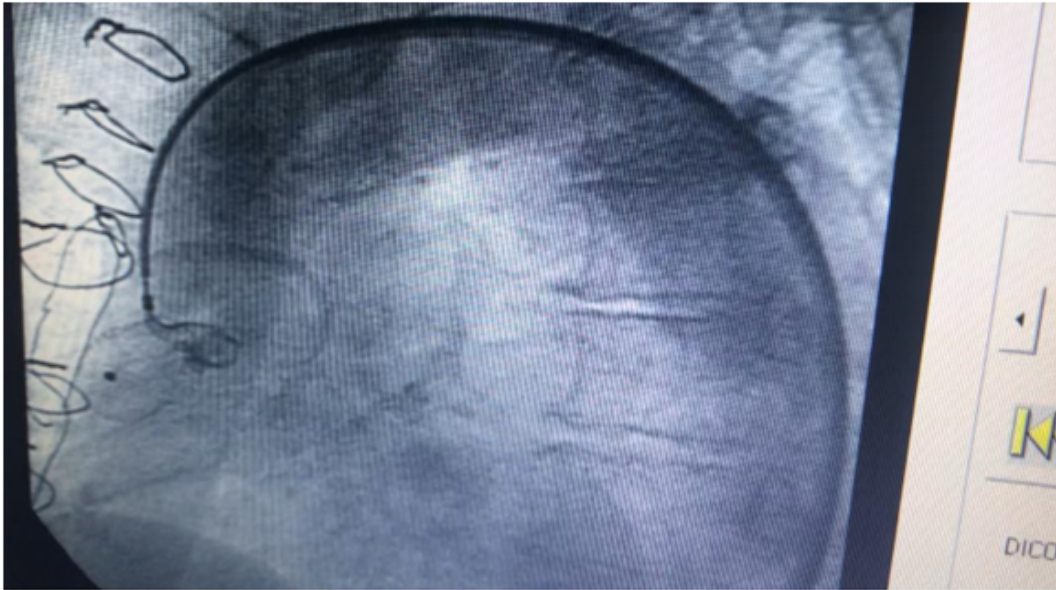


Figure 6



Figure 7

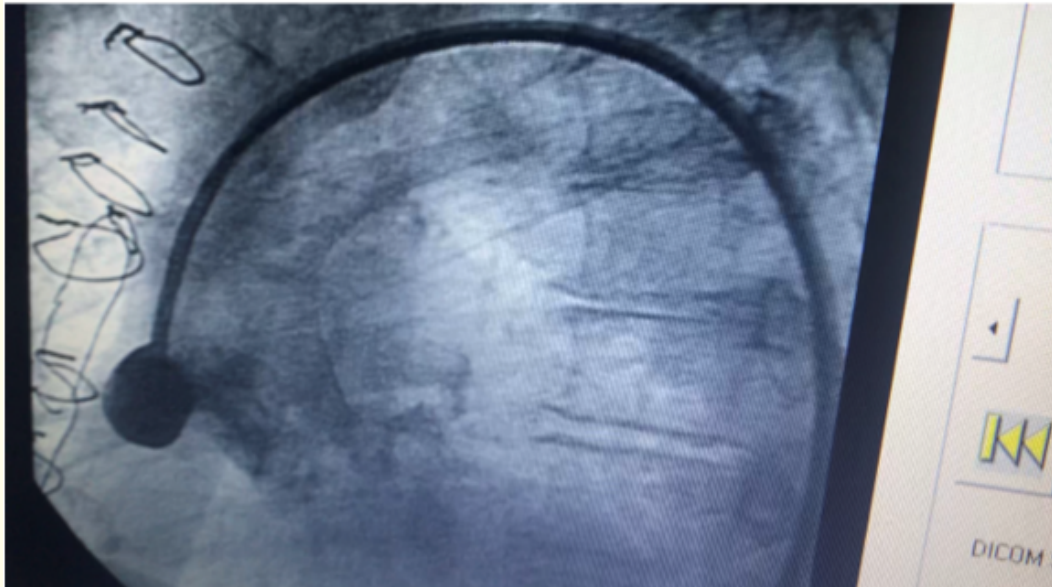


Figure 8

Discussion

Aortocoronary vein graft aneurysms are rare. Up to 2004, 60 cases with diagnosis and treatment with cardiac surgery have been described. These can be located in the proximal third with the distal third. Symptoms are nonspecific dyspnea, angina, nausea, vomiting, and hemoptysis, but are generally asymptomatic. Surgical treatment has been documented as well as Coil embolization, and Stent Graft. Saphenous graft false aneurysm closure with an Amplatzer device has not been described to date with an 18-years follow-up, until July 2020. We have reviewed that the closures with this device have been performed in aneurysms of the broken Valsalva sinuses to the right atrium and the right ventricle. We report closure of the vein graft aneurysm to the right coronary artery with an Amplatzer occluder device with a successful result and follow-up with definitive closure. The treatment of this entity is surgical, at the beginning; at the present this percutaneous technique can be used, without danger to our patient through the right Valsalva sinus, and the pseudoaneurysm is successfully excluded in 18-year follow-up [1-4].

Conclusion

This is the first case in the literature which describes total exclusion of the aneurysm Saphen vein graft with this novel device. The main complications with this disorder are rupture with fistula to the lungs or to right ventricular cavities, infections and death.

Ethical Responsibilities

The authors declare that they have no conflicts of interest when writing the manuscript.

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