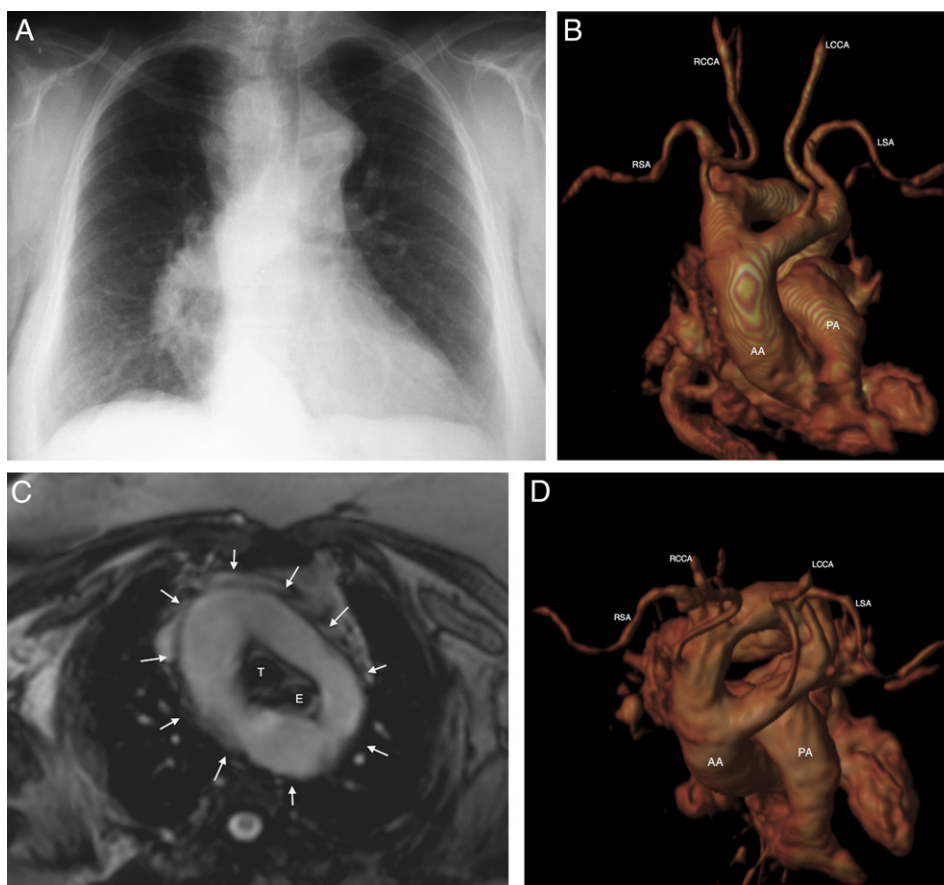


IMAGES IN CARDIOLOGY

Double Aortic Arch Presents With Dysphagia as Initial Symptom

Monica Fernandez-Valls, MD,* Javier Arnaiz, MD,† Dickson Lui, MD,‡
Maria Elena Arnaiz-Garcia, MD,§ Ana Canga, MD,† Rafael Martin-Duran, PhD*
Santander and Salamanca, Spain; and Auckland, New Zealand



From the *Cardiology Department, Marques de Valdecilla University Hospital, Santander, Spain; †Radiology Department, Marques de Valdecilla University Hospital, Santander, Spain; ‡Medicine Faculty, University of Auckland, Auckland, New Zealand; and the §Cardiac Surgery Department, Salamanca University Hospital, Salamanca, Spain. Manuscript received January 30, 2012; accepted February 8, 2012.

A 62-year-old woman presented with breathlessness and dysphagia. Routine chest x-ray showed a widening in the upper mediastinum that suggested a thoracic aorta enlargement. No cardiomegaly was found (A). Transthoracic echocardiography revealed normal left ventricular systolic function with diastolic dysfunction and aortic sclerosis. Magnetic resonance angiography demonstrated a double aortic arch forming a vascular ring, thus compressing the esophagus (B to D). This is a rare congenital cardiovascular disorder (1%), usually diagnosed at an early age. It is possible to reach middle to late adulthood with this pathology, as shown by this patient, and it can produce severe symptoms by compressing the trachea and esophagus. AA = ascending aorta; E = esophagus; LCCA = left common carotid artery; LSA = left subclavian artery; PA = pulmonary artery; RCCA = right common carotid artery; RSA = right subclavian artery; T = trachea.