



EJVES Extra Abstracts[☆]

Simultaneous Repair of Bilateral Renal Artery Aneurysms: A Case Report

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Renal artery aneurysms are rare and most are clinically silent until discovery. Indications for repair include aneurysm growth and difficult to control hypertension. This case report highlights a rare occurrence of bilateral renal artery aneurysms requiring surgical intervention. In order to avoid a reoperative laparotomy, we undertook a simultaneous repair of the aneurysms.

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Compression of the Left Innominate Vein between the Brachiocephalic Trunk and Left Carotid Artery

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We present a case of a 25-year-old male who looked for medical attention for symptoms like dysesthesias in his left arm. Physical examination revealed severe dilations of the superficial veins in his left forearm and arm.

An ultrasound showed no signs of thrombosis. Dynamic phlebography ruled out the presence of extrinsic compression of the left innominate vein. The angiMRI confirmed that the innominate vein was compressed between the brachiocephalic trunk and left carotid.

Therefore, we describe a previously unreported congenital anomaly of the left brachiocephalic vein where the fundamental symptom is the compression of the left innominate trunk.

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Managing Complications of the Misplaced Central Venous Catheter

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Abstract Introduction: Central venous catheters are an integral part of the management of the acutely unwell patient but their use is not without risks.

Report: An 11F double lumen central venous catheter was inadvertently placed into the vertebral artery when the landmark technique was used to obtain an internal jugular vein puncture. The patient required a sternotomy for adequate exposure, and the vertebral artery was ligated.

Discussion: This case demonstrates a rare complication of large bore central venous catheterisation requiring major open surgical repair and is the first reported case of an 11F catheter placed in the vertebral artery requiring surgical ligation.

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