

Successful endovascular repair of a left vertebral artery aneurysm in a patient with transforming growth factor beta receptor II mutation. The patient was initially diagnosed with a left subclavian artery aneurysm on computed tomography angiography ¹⁾.

A 61-year-old woman presented with a cervical schwannoma involving the C5-C6 foramen. She had undergone surgery 22 years before by the posterior approach. We performed an anterior cervical approach. After 12 days, a vertebral artery pseudo-aneurysm occurred. Our review of the literature is focalized on vertebral artery injuries during cervical surgery by the anterior approach.

The patient was treated by coil embolization with a good outcome. To our knowledge, only 6 cases of vertebral artery pseudo-aneurysm after surgery have been reported in the literature.

According to the literature, vertebral artery pseudo-aneurysms resulting in anterior cervical approach are rare but their consequences could be severe. Prevention begins by detailed surgical planning. Peroperative imaging is helpful. Any suspected vertebral artery injury should postpone a contralateral approach before angiographic imaging ²⁾.

Ronchey et al. report an endovascular approach that used to treat a symptomatic extracranial vertebral artery aneurysm associated to an asymptomatic aberrant right subclavian artery aneurysm. A 54-year-old man presented with neck pain, vertigo and loss of balance. The computed tomography (CT) scan demonstrated a left extracranial vertebral artery aneurysm that compressed and eroded the C5 vertebra associated to an aberrant right subclavian artery aneurysm. Endovascular exclusion of the vertebral aneurysm using a covered stent and a hybrid treatment of the aberrant subclavian artery aneurysm were performed. The 13th month follow-up CT scan confirmed the stent-grafts and supra-aortic vessels patency. The endovascular treatment represents a good option for these complex pathologies with excellent immediate results, reduces the complication rate and the hospital stay if compared to open repair. Long-term follow-up is necessary. To authors knowledge this is a unique case in the literature ³⁾.

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Afifi RO, Dhillon BS, Sandhu HK, Charlton-Ouw KM, Estrera AL, Azizzadeh A. Vertebral Artery Aneurysm Mimicking as Left Subclavian Artery Aneurysm in a Patient with Transforming Growth Factor Beta Receptor II Mutation. *Ann Vasc Surg*. 2015 Oct;29(7):1455.e7-1455.e11. doi: 10.1016/j.avsg.2015.05.019. Epub 2015 Jul 11. Review. PubMed PMID: 26169464.

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