

Ruptured venous aneurysm

Is often seen with [arteriovenous malformation](#) (AVM) or developmental venous anomaly (DVA). However, isolated venous aneurysm is unusual.

Aggarwal present a case of ruptured venous aneurysm that presented with subarachnoid hemorrhage (SAH) and intraventricular hemorrhage (IVH). Digital subtraction angiography (DSA) revealed a saccular contrast filling pouch in the left lateral aspect of cervicomedullary junction (CMJ). Endovascular intervention was not a viable option. During surgery, a saccular pliable structure approx. 1.5 × 1 cm was found in the subarachnoid space that was clipped and excised. There were no arterial feeders, no evidence of surrounding AVM, and no dilated perimedullary vein.

This is perhaps the first reported case of ruptured venous aneurysm (without associated AVM) of CMJ, which was successfully managed surgically. The possible etiologies remain an unnoticed head trauma or a congenital vessel wall abnormality. Surgically clipping and excision remains the treatment of choice for such lesion ¹⁾.

¹⁾

Aggarwal A, Salunke P, Futane S, Mathuriya SN, Kumar A, Mukherjee KK, Radotra BD. Ruptured venous aneurysm of cervicomedullary junction. Surg Neurol Int. 2014 Jan 14;5:2. doi: 10.4103/2152-7806.124977. eCollection 2014. PubMed PMID: 24575317.

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