Eleven cases of traumatic external carotid artery branch pseudoaneurysms were admitted to the Second Affiliated Hospital of Jiaxing University. Digital subtraction angiography was performed in all patients. It revealed that the pseudoaneurysms originated from the internal maxillary artery in 5 cases, a superficial temporal artery in 5 cases, and occipital artery in 1 case. Five cases of internal maxillary artery pseudoaneurysms and 2 cases of superficial temporal artery pseudoaneurysms were treated by embolization; the other 3 cases were surgically resected.

Complete cessation of nasal bleeding was achieved in all 5 pseudoaneurysms of the internal maxillary artery after the endovascular therapies. Scalp bleeding stopped and scalp defect healed up in 2 patients with superficial temporal artery pseudoaneurysms treated by interventional therapy. All patients were followed up for 0.5-2.0 years without recurrence of nosebleed and scalp lump.

For patients with repeated severe epistaxis, after craniocerebral injury, digital subtraction angiography should be performed as soon as possible to confirm a traumatic pseudoaneurysm. Endovascular therapy is an effective method for traumatic internal maxillary artery pseudoaneurysms. For patients with scalp injuries and pulsatile lumps, further examinations including digital subtraction angiography should be performed to confirm the diagnosis. Surgical treatment or endovascular therapy for scalp traumatic pseudoaneurysm is effective ¹⁾.

1)

Wang GH, Shen HP, Chu ZM, Shen JG, Zhou HH. Traumatic pseudoaneurysms of external carotid artery branch: Case series and treatment considerations. Chin J Traumatol. 2021 Apr 21:S1008-1275(21)00059-6. doi: 10.1016/j.cjtee.2021.04.003. Epub ahead of print. PMID: 33941432.

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