Multi-Detector Row Computed Tomography in Inflammatory Aneurysms of the Abdominal Aorta.

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The inflammatory aneurysm of the abdominal aorta is a different variant within the atherosclerotic aneurysms, with an incidence raging from 3-10%. It is characterized by a triad of:

* Aneurysmal wall thickening;
* Fibrotic and/or inflammatory changes at perianeurysmal and retroperitoneal level.
* Adherence to adjacent abdominal organs (vena cava, ureters, duodenum).

Multi-detector angiotomography allows us, in a non-invasive way, to establish the characteristic changes at the level of the aorta and involvement of adjacent structures.

The case of a 63 years old smoker with hypertension and dyslipidemia, with a history of coronary artery disease and myocardial infarction, was presented at emergency with pulsatile abdominal mass and back pain. Abdominal aortic angiotomography shows the presence of an infrarenal aneurysm of 54 x 56mm with a thickened wall, partially thrombosed and calcified and the presence of a tissue with density of soft parts and well defined margins with intense homogeneous enhancement, after the intravenous contrast injection (short arrows). This tissue circumferentially around the aorta, extending into the pelvis along the iliac vessels and involves the inferior vena cava (long arrows) and left ureter in its middle third (thick arrow), causing proximal ureteropelvic dilatation (asterisk).

Fig. 1.