Giant Extracranial Internal Carotid Artery Aneurysm

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A 77-year-old woman, with a history of hypertension, dyslipidemia, and vitiligo was admitted to our hospital with a large growing palpable mass in the right side of the neck. She had symptoms of pain in the right ear, headache, dizziness, dysphagia, and hoarseness. Physical examination revealed a large pulsatile mass in the right cervical region. Electrocardiography showed a sinus rhythm with a heart rate of 80 beats/min. Transthoracic echocardiography showed normal left ventricular systolic function and aortic root diameter with left ventricular hypertrophy. The diagnosis was clarified by computed tomography of the neck, which demonstrated a partially thrombotic huge saccular aneurysm with axial dimensions of 59 × 55 mm (Fig 1). Its origin was from the right internal carotid artery. It extended from just distal to the carotid bifurcation up to the level of the mandibular angle and caused compression to the right external carotid artery and jugular vein. After the aneurysm, cervical and intracranial portions of the right internal carotid artery were totally occluded. This aneurysm caused the submandibular gland to shift slightly anteriorly. Preoperative coronary angiography revealed only noncritical coronary artery plaques. The patient underwent successful operation for the aneurysm (Fig 2) and was discharged from the hospital uneventfully.

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Fig 1.

Fig 2.