The patient is a 52-year-old male diagnosed with adenocarcinoma of the distal esophagus in Barrett’s esophagus, cT3N+M0. He was treated with neoadjuvant radiotherapy and chemotherapy as well as esophagectomy with three-field lymph node dissection following the McKeown technique. Thirty days after being discharged from the hospital, he was diagnosed with a left laterocervical mass. Ultrasound demonstrated a vascular tumor formation. Further study with CT angiography (Fig. 1) revealed a partially thrombotic pseudoaneurysm of the left transverse cervical artery. Selective embolization was performed (Fig. 2), which provided satisfactory improvement. Although pseudoaneurysm of the transverse cervical artery is an uncommon complication, it should be considered after cervical lymph node dissection.

Please cite this article as: Lopez Gordo S, Muñoz Campana A, Miró M, Farràn L. Pseudoaneurisma de la arteria cervical transversa tras esofagectomía McKeown. Cir Esp. 2014;92:e15.

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