The patient was a 75-year-old man with a history of poorly-controlled hypertension. Eight years earlier he had had acute aortic syndrome. Transesophageal echocardiography revealed the presence of an intramural hematoma involving the descending thoracic aorta. In view of his left hemothorax, an end-to-end aortic graft was performed. On the first follow-up visit he reported hoarseness and pain with movement in the left axillary and supraclavicular area.

Chest X-ray (Figure 1) showed a large mass in the upper part of the left lung. Magnetic resonance angiography of the aorta (Figure 2) done after gadolinium injection in a peripheral vein confirmed the presence of a small aneurysm (lower asterisk) immediately distal to the graft (arrows) and a large aneurysm (upper asterisk) immediately proximal to the graft, compressing the supra-aortic trunks.

A stent was recently implanted to isolate the aneurysm from the circulation. On the first follow-up visit the patient reported that the pain had disappeared although he still had some hoarseness.

Paula Tejedor\textsuperscript{a}, José Alberto San Román\textsuperscript{a} and José María Sierra\textsuperscript{b}
\textsuperscript{a}Instituto de Ciencias del Corazón (ICICOR), Hospital Universitario. \textsuperscript{b}Centro Diagnóstico, Valladolid, Spain

Angio-MRI Diagnosis of a Post-Surgical Aortic Aneurysm

Fig. 1.

Fig. 2.