

Arterial diseases

Case 1

Abdominal aortic aneurysm A.A.A

62-year-old woman, complains of throbbing backache for 3 months. She put it down to arthritis. She also has dull epigastric pain for which an abdominal uss was carried out. This showed a calcified soft tissue mass in front of the lumbar vertebrae

Questions

1. How do patients with AAA presents
 2. Once clinically diagnosed in the elective patient, what investigation would you do
 3. What are the indications for endovascular repair (EVAR)
 4. What are the anatomical characteristics necessary to be suitable for EVAR
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Case 2

Aortic enteric fistula

65-years-old woman has been admitted with acute hematemesis and melana for 6hrs, the melana is more sever. She is collapsed from hypovolemic shock with a BP of 60mmHg systolic with a weak pulse of 120/min. she has along abdominal scar from xiphisternum to symphysis pubis. This was for an operation to improve the circulation to her legs carried out 3 years ago

Questions

1. Outline your immediate management
 2. What is your definitive management
 3. How do you prevent this complication
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Case 3

Carotid artery stenosis

58-year-old male smoker for many years, complains of a sudden episode of visual impairment in the form of curtain dropping in front of his left eye. On a few occasions he felt his right arm became weak but the power soon returned to normal. At the same time his wife noticed that he had some transient difficulty in finding words to speak. On admission his head CT was negative for any bleed or lesion

Questions

1. What is this presentation called?
 2. How does it differ from stroke?
 3. What investigation would you do?
 4. What are your indications for surgical intervention?
 5. What are the choices for surgical intervention?
 6. What is the role for percutaneous transluminal angioplasty?
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Case 4

Critical Limb Ischemia

72-year-old man with rest pain in his left distal foot for 4 weeks. He has sleepless nights because of the pain, he sleeps sitting on an easy chair to get some relief from his pain. He has been a heavy smoker for as long as he can remember. He has a normal femoral pulse and none below

Questions

1. How do you define Critical Limb Ischemia?
2. What is your plan management after initiating best medical therapy and analgesia
3. What surgical revascularization should this patient have if the finding is a long superficial femoral artery occlusion with a flow seen only in the tibio-peroneal trunk with heavily calcified occluded popliteal vessels
4. What would you do in a common iliac and external iliac block with a patent femoral artery from collaterals