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### IMAGE FOCUS

**Interrupted aortic arch accompanied by a giant saccular aneurysm in a 53-year-old man**

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A 53-year-old man with history of polyarteritis was admitted for chest distress and breathlessness. Physical examination showed the blood pressure was significantly greater in the right arm than in the left arm (right 180/90 mmHg vs. left 140/80 mmHg). Grade III systolic murmur was heard at the three to four left intercostal space. Transthoracic echocardiography revealed moderate tricuspid regurgitation, and pulmonary hypertension (estimated pulmonary pressure 36 mmHg). Subsequently, an ECG-gated contrast-enhanced multi-slice computed tomography (MSCT) angiography was performed to clarify the aortic morphologic conditions. MSCT axial and 3D reconstruction images clearly revealed a total absence of aortic arch, and a giant saccular aneurysm of descending thoracic aorta (Figure 1). Multiple twisted ramus anastomoticus rasing from right subclavian artery supplying the descending aorta. The patient was referred to thoracic surgery and a single AO-DA bypass graft was implanted.

Interrupted aortic arch (IAA) is a very rare congenital cardiovascular disease. In IAA, 95% of cases present with other congenital anomalies such as truncus arteriosus, aortic stenosis, transposition of great arteries, and ventricular septal defects. But no cases of IAA accompanied by a aneurysm has been reported in the medical literature. We first report such a case by MSCT angiography and 3D reconstruction.

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