Saphenous vein graft aneurysm connected to lung parenchyma: a very unusual cause of haemoptysis

Juan Jiménez-Jáimez*, Eduardo Molina, and Rafael Melgares
Cardiology Department, Virgen de las Nieves Universitary Hospital, Granada, Spain
* Corresponding author. Tel: +34 667 242 021, Fax: +34 958 020 158, Email: jimenez.jaimez@gmail.com

A 74-year-old man, with a coronary artery bypass surgery 12 years before, was referred for a life-threatening episode of haemoptysis. Chest X-ray showed mild cardiomegaly and a right pulmonary mass (Panel A, arrow) located close to the pulmonary hilum. Computed tomography angiogram (Panel B) demonstrated an aortic pseudoaneurysm with thrombus (arrow) placed at the proximal anastomosis of a saphenous vein graft to circumflex artery that was occluded. Three-dimensional computed tomography reconstruction (Panel C) showed the anterolateral position of the aneurysm (long arrow) that was connected to lung parenchyma (short arrow) with no evidence of aorto-bronchial fistula. This was also observed in aortography where we could appreciate complete absence of blood flow to lung or bronchi after injection of contrast (Panel D). Surgery was performed and intraoperative transoesophageal echocardiography showed the ascending aortic dilatation (Panel E); Panels F and G show the large saphenous vein graft aneurysm at the proximal anastomosis connected to lung parenchyma corrected with a Gore Tex patch.