

RF4 Management of Aberrant Subclavian Artery Complications

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PURPOSE: The aberrant right subclavian artery (ARS) arises as the last branch off the aortic arch. In children, it may cause symptoms known as dysphagia lusoria. The purpose of this report is to describe three cases of ARS in adults presenting with a variety of complications.

METHODS: Patients with ARS were identified from our database. Demographics, imaging studies and interventions were obtained from hospital and office records. Follow-up studies and clinical status at the most recent clinical evaluation were noted.

RESULTS: In a 3-year period, 3 patients (2 women and 1 man) presented with ARS complications. Patient A developed a 5 cm aneurismal dilatation of the ARS. Because of previous chest operations, an endovascular approach was used to repair the aneurysm with a covered stent. Patient B presented with dysphagia. All other possible causes were ruled out, and ligation of the ARS was performed with simultaneous transposition to the right carotid artery. Patient C was injured in an auto-pedestrian accident. The aortic pseudoaneurysm was distal to the origin of the ARS. In order to safely place an endograft, simultaneous transposition of the ARS to the right carotid was performed.

CONCLUSION: ARS artery is infrequently symptomatic in adults. Transposition of the ARS to the right carotid is one of the methods used to preserve blood flow to the right arm.