

Introduction

- ❑ The management of Supraaortic post traumatic pseudo aneurysm is challenging
- ❑ The endovascular therapy is the preferred line of treatment in zone one neck injuries with much less complications

Case scenario

- ❑ **Male 26 year old**
- ❑ He sustained a gunshot injury at the root of the right side of the neck 3 months duration with pulsating mass at the root of the neck
 - Inlet: Supra-Clavicular fossa
 - Outlet : upper back



Pseudo aneurysm of the proximal subclavian artery

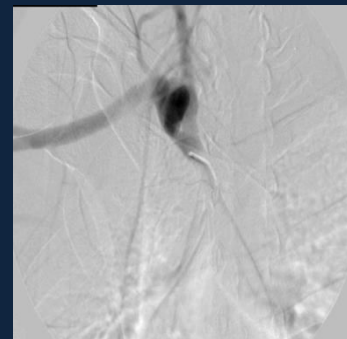
Surgery

Proximal control
Blood loss
Morbidity and mortality

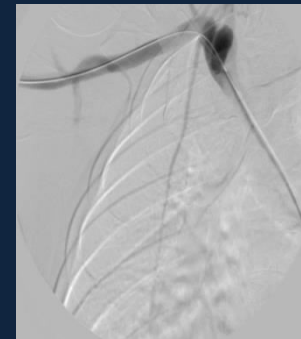
Endovascular

Less invasive
avoid sternotomy

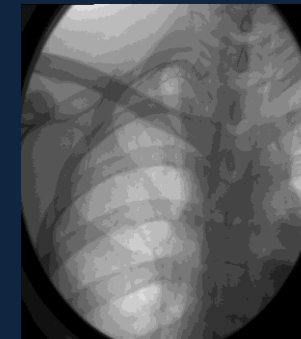
Endovascular therapy



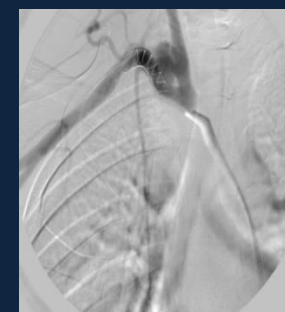
Angiography through Rt femoral



Exclusion of subclavian pseudoaneurysm by PTFE wallgraft



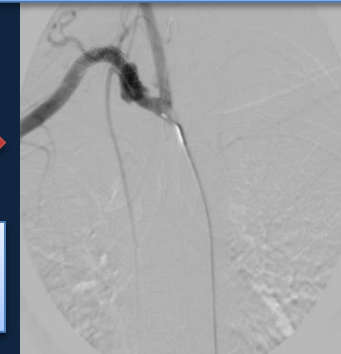
The aneurysm is still patent



carotid pseudoaneurysm

Challenges →

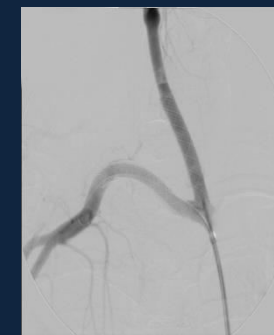
Short neck
Precise deployment



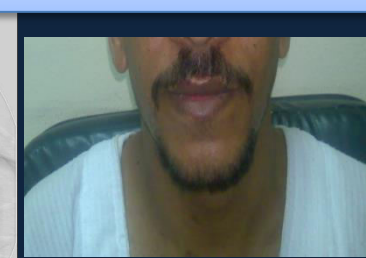
Exclusion by another stent but Endoleak from subclavian part



Deployment of another stent in the subclavian



Exclusion of the aneurysm with patent both carotid and subclavian



24 months post procedure and neck mass disappeared with patent graft

Conclusion

Endovascular exclusion is better alternative for the management of supra-aortic trunk lesions; being less invasive, more simple, with less complications and equally durable