



Image 2:057

Aortic Branch Aneurysm in the Patient with Behcet's Disease

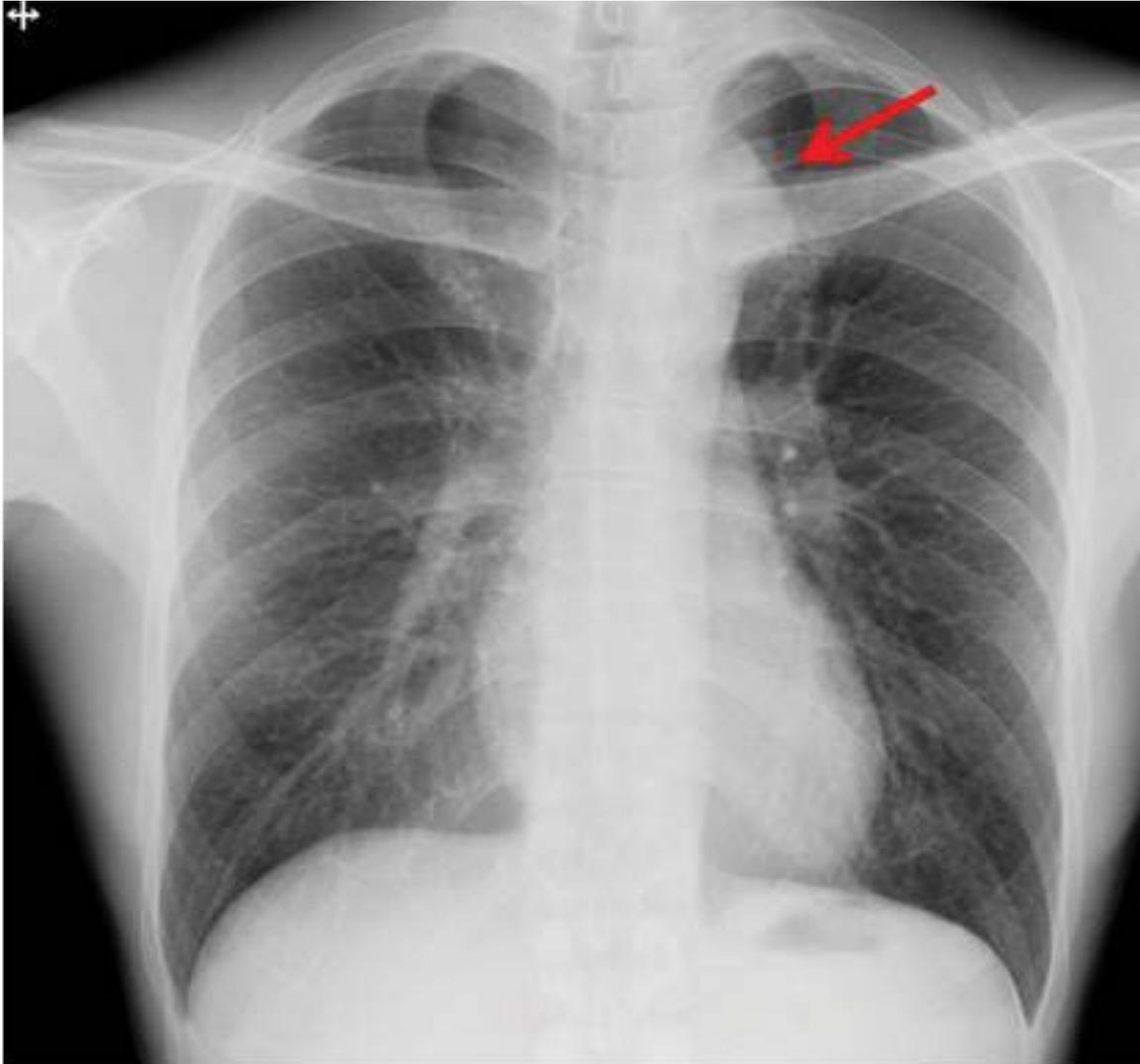


Figure 1: Chest X-ray showing a mass lesion (arrow) near the aortic arch in the left upper field.

Information

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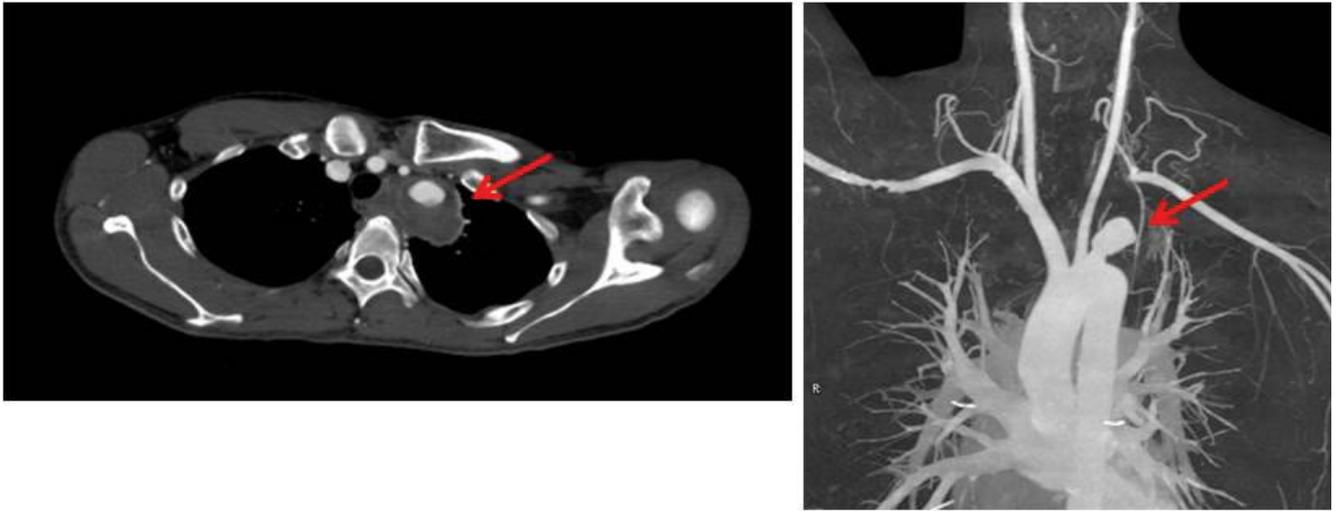


Figure 2: Enhanced CT image showing the aneurysm and occlusion of left subclavian artery (arrow).

A 35-year-old male patient presented with fever. Chest X-ray revealed a mass lesion in right upper field (Figure 1). The enhanced pulmonary CT showed the aneurysm and occlusion of left subclavian artery (Figure 2). The value of CRP increased to 2.88 mg/dl. The result of bacterial blood culture was negative. He has no episodes of hypertension and diabetic mellitus. He has had an oral aphtha, a nephelopia, an erythema nodosum and a genital pain. His types of HLA are B51 and A26. He was diagnosed as Behcet's disease with vasculitis. The vascular system is involved in 25-30% of patients with Behcet's disease [1]. Arterial manifestations of the disease involve aneurysm formation (65%) and occlusions (35%) [2]. When an aortic aneurysm is observed, it is necessary to pay attention to the clinical symptoms of Behcet's disease.

References

1. Kabbaj N, Benjelloun G, Gueddari FZ, Dafiri R, Imani F (1993) [Vascular involvements in Behcet disease. Based on 40 patient records]. *J Radiol* 74: 649-656.
2. Hiller N, Lieberman S, Chajek-Shaul T, Bar-Ziv J, Shaham D (2004) Thoracic manifestations of Behcet disease at CT. *Radiographics* 24: 801-808.