

عنوان مقاله:

AORTIC ANEURYSM PRESENTING WITH DYSPHAGIA

محل انتشار:

چهاردهمین کنگره سالانه طب اورژانس ایران (سال: 1398)

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خلاصه مقاله:

Background and Aim : Dysphagia or difficulty swallowing means using more effort to movesolids or liquids from the oropharynx to the stomach. Dysphagia is classified into two types, oropharyngeal and esophageal dysphagia. They can either be caused by mechanical obstructionsor by neuromuscular motility disorders. Methods : 66-year-old male suffering from painful swallowing was admitted to the EmergencyDepartment. He complained of throat discomfort, dysphagia and odynophagia of progressiveseverity of about three months' duration, which was not related to cold or warm food. Onadmission, the patient was completely alert and cooperative. His vital signs was stable and tonguemobility and strength was found. During a three months period, different tests and evaluat ionswere performed. No significant finding was seen in the EKG or the EMG-NCV evaluations. Incidental chest radiography showed evidence of marked dilation of the aortic arch and deviation of the trachea. All lab tests were normal except for Hemoglobin which was 15.2 g/dl in the firstday of admission but 12.5 g/dl three days later. Echocardiography was performed and an LVEF of 55% and a grade 1 left ventricular diastolic dysfunction were reported. Also, aneurysmal dilation of the thoracic aortic curve (96mm × 88mm) containing crescent-shaped thrombosis together with calcification (46mm × 80mm) mostly suggestive of thrombosis within aneurysm was seen. With adiagnosis of three-vessel disease (100% stenosis of LAD, Major Diagonal and RCA) he wasrecommended for CABG. Unfortunately, the patient passed away 7 days after admission whileundergoing preparations for the treatment. Results : ... Conclusion : In coping with dysphagia, gastrointestinal disorders should not be the onlycomplications that are paid attention and dysphasia must be considered as a rare sign of aneurysms. The case report on this rare cause should contribute to better diagnosis of .dysphagia aortica andswallowing difficulties in general

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