

PSEUDOANEURISMA DA ARTÉRIA FEMORAL PROFUNDA

DEEP FEMORAL ARTERY PSEUDOANEURYSM

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CASE REPORT

A 51-year-old male patient with paranoid schizophrenia, HIV and HCV infection, and drug addiction (currently on a methadone program but with prior intravenous injections), was admitted due to a pulsatile mass in the right femoral region. During the initial evaluation there was skin integrity, no signs of recent injections, presence of all pulses and a 5cm expandable mass in the right femoral region. The colour-flow ultrasound examination demonstrated a deep femoral artery pseudoaneurysm

confirmed by CTA, which additionally, revealed the presence of thin, cylindrical objects (fragmented needles - figure 1).

During the surgical intervention, there was no evidence of overt infection and the procedure consisted of pseudoaneurysm resection, primary suture of the artery and removal of the needle fragments. Additionally, long-term antibiotherapy was instituted.

The final message is a call-for-attention for the presence of needle fragments in this type of lesions, in order to raise the protection level of the surgical team.



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