

An Unusual Chest Pain

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Case presentation

A 67-year-old gentleman with a prior history of coronary artery disease and a four-vessel coronary artery bypass graft five years prior to admission, presented to the hospital complaining of a 12-day history of midsternal chest pain. A chest radiograph performed 18 months prior to this presentation revealed a normal cardiovascular silhouette and normal mediastinum. Upon presentation, a new chest radiograph revealed a wide mediastinum. A computed tomography done emergently revealed an aortic thrombus starting at superior mediastinum and large (6 cm) pseudoaneurysm in anterior mediastinum (**Figures 1 and 2**). An emergency angiogram revealed that the pseudoaneurysm to be emerging 2 cm below the innominate takeoff in the ascending aorta, which corresponded exactly to the prior CABG cannulation site (**Figure 3**). The patient underwent successful repair.

Key words: Chest pain, coronary artery disease, aneurysm, aorta, pseudoaneurysm

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Figure 1. CT Scan of Chest Revealing a 6 Cm Pseudoaneurysm in the Anterior Mediastinum.



Figure 2. CT Scan Oblique Image Showing the Pseudoaneurysm.



Figure 3. 6 Cm Pseudoaneurysm with about 2.5 Cm Neck in Anterior Wall of Distal Ascending Aorta 2 Cm from the Innominate Artery Takeoff.

