A 69-year-old man with a history of hypertension was referred for the evaluation of enlargement of the mediastinum on chest X-ray film (Fig. 1). Clinical examination was normal. Computed tomographic angiography of the chest (Figs. 2, 3) showed a balanced type of double aortic arch, both of which arose from the ascending aorta anterior to the tracheae. Each arch gave origin to the common carotid and subclavian artery, and joined right posterior ward to form the descending aorta. The patient had neither respiratory symptoms nor dysphagia. Barium esophagograms showed no extrinsic compression of the esophagus. We followed him without surgical treatment.

Key words: double aortic arch, balanced type, vascular ring

Figure 1. Chest X-ray.  
Figure 2. Cranial view.
Figure 3. Anterior cranial view. The right aortic arch (RAA), left aortic arch (LAA), ascending aorta (AAo), descending aorta (DAO), pulmonary artery (PA) are as noted.