Large Bilateral Isolated Internal Iliac Artery Aneurysms

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An 81-year-old man with no past medical history visited us with pitting edema in the lower legs bilaterally. On contrast-enhanced computed tomography, large isolated internal iliac artery aneurysms (IIIAAs), instead of deep vein thrombosis, were incidentally detected on both sides, with a maximum diameter of 78.9 mm on the right side and 71.9 mm on the left side (Pictures 1-3).

IIIAAs are defined as solitary aneurysms of the internal iliac arteries. They are rare and are found in less than 0.03% of patients according to large-scale autopsy data (1). Moreover, IIIAAs do not tend to be found until they grow larger than other parts of aortic aneurysms (2). Therefore, iliac artery aneurysms have been commonly found to rupture, a phenomenon that is potentially associated with sudden death. Only a few reports of surviving patients with bilateral IIIAAs with diameters greater than 70 mm have been pub-

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lished thus far. It has been reported that 33% of patients with iliac artery aneurysms are deemed to require immediate surgery due to the suspicion of rupture (2). In this case, a wait-and-see approach was taken at the patient’s request, although operative treatments, including stent grafting and/or coiling embolization, were recommended.

IIIAAs can cause pitting edema in the lower legs if they compress the ilio-femoral veins. In our case, there was no evidence of ilio-femoral venous compression by the IIIAAs. We considered diastolic dysfunction to be the cause of the pitting edema that occurred in the lower legs bilaterally because transthoracic echocardiography showed mild diffuse left ventricular hypertrophy with a normal ejection fraction and a low early diastolic filling wave/atrial filling wave ratio (E wave/A wave ratio=0.71).

We experienced a very rare case of large bilateral IIIAAs. This case highlights the clinical importance of including IIIAA in the differential diagnosis under any clinical circumstance in order to prevent sudden death from IIIAAs.

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References