

Obstrucción aguda de la aorta

Acute aortic obstruction

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A 72-year-old male with alcohol and smoking habits and without other relevant medical history, admitted to the Emergency Department, due to abdominal pain in the lower quadrants and vomiting, with 24 hours of evolution, without other complaints. On examination he presented tachycardia, polypnea, cloudy, with perfusion time longer than 2 seconds and absence of femoral pulses. Blood tests showed metabolic acidemia with hypoxemia and hyperlacticaemia, acute kidney injury and elevated D-dimers. Thoraco-abdominopelvic CT revealed: "Diffuse calcified aortic atheromatosis without opacification of the aorta from the thoracoabdominal transition to the external iliacs" (Figure 1).

The diagnosis of acute obstruction of the thoracic aorta was made and the Vascular Surgery of a tertiary hospital was contacted for surgical treatment. Before proceeding to the transfer of the patient, orotracheal intubation was performed. There, they made an exploratory laparotomy, with construction of a bypass with a prosthesis between the distal descending thoracic aorta, superior mesenteric artery and left common femoral artery. However, despite the measures instituted, the patient died.

Acute aortic obstruction is a rare event^{1,2} and potentially life threatening.² In the presence of sudden pain, pallor, absence of pulse and paresthesia of the lower limbs, the differential diagnosis with this clinical entity should be kept in mind.¹

The most common etiologies are large emboli, saddle on the aortic bifurcation and thrombosis of the native artery in an atherosclerotic aorta.² Revascularization by itself does not ensure a good outcome in patients.² Therefore, a rapid diagnosis and early surgical intervention are decisive in the prognosis of the patient and in the reduction of morbidity and mortality.¹

Figure 1



CONFLICT OF INTEREST

The authors declare that they have no conflict of interests.

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ETHICAL ASPECTS

All participants submitted a consent form to be included in this study.

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