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Tracheal Compression as a Result of a Double Aortic Arch: A Rare Cause of Dyspnea

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Figure 1. Patient's emergency room chest x-ray revealing widening of the right superior mediastinum (arrows).

A 62-year-old man presented with dyspnea on minimal exertion. A chest X-ray showed widening of the superior mediastinum (Figure 1). Computed tomography (CT) scan of the chest revealed a double aortic arch with an approximate 2–3 cm subglottic compression of the trachea (Figure 2). This subglottic narrowing was confirmed upon bronchoscopy and a tracheal stent was placed for anomaly

Figure 2. CT of the chest revealing tracheal stenosis (dotted arrow). The normal aortic arch can be seen on the left side (A) along with the anatomical variant (B) compressing the trachea. Abbreviation: CT, computed tomography.

that forms a vascular ring, compressing the trachea and esophagus.¹ This anatomical variant can be inspected noninvasively on chest x-ray and confirmed upon use of a chest CT.

Reference

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