Images in Cardiology: Aortic Intramural Hematoma in a 17-Year-Old Patient with Dysphagia

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FIG. 1 The extent of the intramural hematoma as well as the dimension of the aortic aneurysm (57×14 mm) are clearly visible on anatomic axial fast-spin-echo images.

A 17-year-old man was seen in an ear-nose-throat clinic for dysphagia. His symptoms had been present for four days and included discomfort and difficulty swallowing. The examination revealed no cause for the patient's complaints and he was referred to our chest-pain unit due to a concomitant mild chest pain. On physical exam, a Marfanoid habitus was prominent although the patient had no family history of

FIG. 2 Functional double-oblique gradient echo images revealed the corresponding dissection membrane and a mild aortic regurgitation, and showed no involvement of the coronary ostia.

Marfan's syndrome. Electrocardiogram and chest x-ray revealed no pathologic signs. A transthoracic echocardiogram demonstrated aortic root dilation to 55 mm. Magnetic resonance imaging of the heart and thoracic vessels finally demonstrated a dissection with an intramural hematoma in the ascending aorta. No pathologic compression or signs of ischemia of the esophagus were detected. Because the patient had to undergo immediate aortic surgery, a functional assessment could not be performed.