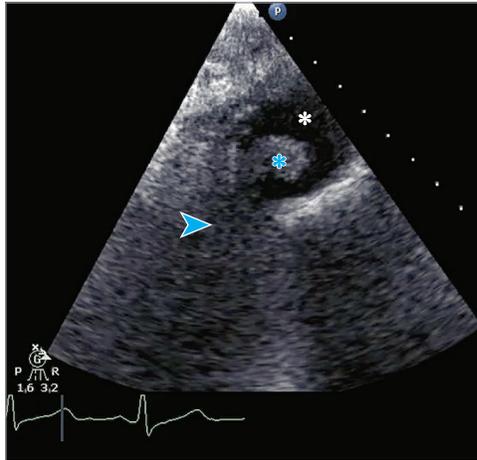


Cardiovascular Images

A Patient in Their 40s With Intermittent Hemoptysis

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A Transthoracic echocardiogram with ultrasonic-enhancing agent, suprasternal view



B Contrast computed tomography of aortic pseudoaneurysm



C Computed tomography, pulmonary window

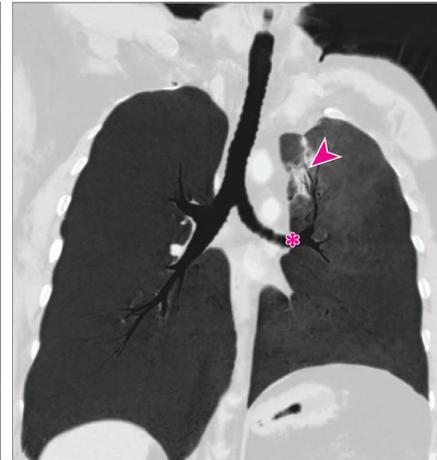


Figure. A, Suprasternal view of a transthoracic echocardiogram with an ultrasonic-enhancing agent, showing contrast in the descending aorta (arrowhead). Distal to the left subclavian artery, contrast fills the lumen. Increased echodensity with a round appearance and a narrow neck is shown (blue asterisk); there is an absence of contrast surrounding this round area, corresponding to a thrombus (white asterisk). B, Contrast computed tomography showing an aortic pseudoaneurysm distal to the left subclavian artery (arrowhead). C, Computed tomography pulmonary window showing pulmonary sequestration (arrowhead) near to the left bronchus (asterisk).

What is the differential diagnosis of the finding noted in the descending aorta in a patient with hemoptysis? A patient in their 40s with a 6-month history of intermittent hemoptysis and anemia presented to the emergency department with new-onset dyspnea and massive hemoptysis. The patient had a remote history of cocaine use and recent negative test results for HIV and tuberculosis. On admission, an electrocardiogram showed sinus tachycardia. The patient's hemoglobin level was 8

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Video

g/dL (to convert to grams per liter, multiply by 10). A transthoracic echocardiogram was performed. An unusual echodensity was noted in the descending aorta; an ultrasonic-enhancing agent was given for better visualization (Figure, A; Video). A contrast chest computed tomography scan was then performed. An aortic pseudoaneurysm with an aortobronchial fistula was evident (Figure, B and C). A Medtronic Valiant Captiva stent graft 157 mm × 32/32 mm in size was placed satisfactorily. The patient was discharged without complications and continues to receive follow-up care in the outpatient clinic.^{1,2}

ARTICLE INFORMATION

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