

FEMORAL ARTERY ANEURYSM CAMOUFLAGE BY DEEP SUBCUTANEUS ABCESS

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Introduction: Femoral artery aneurysm is rare and presentation might mimic other condition (1,2). We reported a rare case of femoral artery aneurysm mimicking thigh abscess in a young patient.

Discussion: A case reported of a 24-year-old gentleman, non-smoker, with underlying diabetes mellitus and hypertension, presented with sudden onset of painful left thigh swelling for one day, associated with difficulty in ambulation but otherwise afebrile. Physical examination revealed a 10x10cm swelling at the anteromedial aspect of the proximal thigh which was tender and fluctuant on palpation. Blood investigation showed elevated WBC while other investigations are within normal limit. Ultrasound reported a deep subcutaneous abscess with no internal vascularity seen. An incision and drainage over the left thigh was arranged. Intraoperatively, 500cc of blood clot was evacuated and further exploration (on-table referral to Surgical colleagues) revealed a ruptured pseudoaneurysm of left Superficial Femoral Artery and left Profunda Femoris. Both vessel and femoral vein appeared friable with multiple bleeding point. The pseudoaneurysm was excised and bleeding secured. Bypass was deemed not possible as the vessels are friable and there was no suitable vein graft to harvest. CT angiogram done postoperatively shown non-opacification of left Common Femoral Artery, faint opacification at Anterior Tibial Artery, and subsequent vessel. A transfemoral amputation was done 10 days later.

Conclusion: True isolated aneurysm of femoral artery is a rare pathology and normally found in elderly with smoking history (1). Presentation of this aneurysm may mimic abscess or soft tissue swelling hence misdiagnosis of this aneurysm has been reported worldwide (2). Anteromedial thigh swelling appearance might be easily mistaken for an abscess. Although, ruptured aneurysm of femoral artery are rare, managing surgeon should always have a high index of suspicion as it may lead up to severe morbidity for the patient.