A 44-year-old-man was admitted to our hospital for a painful mass of the right lower quadrant of the abdomen. It appeared spontaneously three weeks before the presentation without fever and any other associated symptoms. The past medical history of this patient was remarkable for oral and genital aphthous ulcers and phlebitis of the right lower limb two years earlier, of unknown etiology. The physical exam revealed a vascular mass of the right lower abdominal quadrant, pseudofolliculitis and oral aphthous ulcer. The arterial angioscan of the aorta and the lower limbs showed a pseudo-aneurysm of the right common iliac artery of 13 cm of diameter (Fig. 1 et 2). Routine laboratory showed an inflammatory syndrome. The diagnosis of vascular Behçet’s disease with arterial involvement was established. The patient underwent a surgical repair including a prosthetic placement graft between right common iliac artery and right external iliac artery, and ligation of the hypogastric artery. An immunosuppressive treatment was started. After two year of follow-up, the patient remained asymptomatic without recurrence of vascular complications.

Behçet’s disease is a chronic, multisystem inflammatory disorder characterized by vasculitis. It was first described by Hulus Behçet in 1937 [1]. Arterial pseudoaneurysms are rare vascular manifestations, it can be a mode of revelation of the disease. The treatment formation is highly recommended because the imminent risk of rupture. The management is mainly surgical associated with immunosuppressive treatment to control the formation of new aneurysms and to minimize the risk of graft occlusion [2].
Figure 1  Transverse CT scan; the arrow showing a 13 cm pseudo-aneurysm of the right iliac common artery.
Coupe TDM transverse montrant un pseudo-anévrisme de 13 cm de l’artère iliaque commune (flèche).

Figure 2  Frontal CT angiogram, showing the voluminous pseudo-aneurysm of the right iliac common artery (arrow).
Angio-TDM : noter l’importance du pseudo-anévrisme de l’artère iliaque commune (flèche)

Conflict of interest
None.

References