Giant Pseudoaneurysm of the Left Ventricle

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A 71 year old male patient presented with progressive dyspnoea for 2 months duration. His ECG showed old inferior wall myocardial infarction.

Transthoracic Echocardiography revealed a large pseudoaneurysm at the base of the inferior wall (Figure 1). The body of the pseudoaneurysm was 4.5 cm with a narrow neck of 0.9 cm. Thrombus was present adherent to its wall. The communication between the body of the pseudoaneurysm and left ventricular chamber was confirmed by a colour Doppler (Figure 2). The patient expired the next day while waiting for surgery.

Pseudoaneurysm is an uncommon complication of myocardial infarction. When the myocardium ruptures, the blood entering the pericardial space is contained by clot formation in the vicinity of the rupture. Thus the body of the pseudoaneurysm is made up of pericardium only while its neck is made of ruptured ends of the myocardium. The neck of the pseudoaneurysm is always narrow. In contrast, the neck of an aneurysm is wide and the body is made of myocardium. Because of the high risk of rupture such pseudoaneurysms require emergency surgery.