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IMAGE FOCUS

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Giant saphenous vein graft aneurysm presenting as stridor

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A 68-year-old male with a history of previous coronary artery bypass (CABG) surgery and chronic obstructive pulmonary disease presented with stridor and dyspnoea.

CABG using long saphenous vein conduits to the right coronary artery and circumflex had been performed in 1984 and 1986.

A chest X-ray showed a mass lesion adjacent to the right heart border with consolidation in the right upper zone (Panel A). The lesion was further evaluated by CT coronary angiography (Panel B).

A large false aneurysm arising from the proximal aspect of the right coronary graft measuring ~10 cm in diameter with thrombus within it was confirmed.

The aneurysm was causing pressure atelectasis of the right middle lobe due to bronchial compression.

Saphenous vein graft aneurysm is a rare complication of CABG which can present in a wide variety of ways including chest pain, dyspnoea, wheeze, and haemoptysis.

