

# Dissecting thoracic aneurysm: an unusual presentation

An 80-year-old man presented to the emergency department having collapsed. On arrival his Glasgow Coma Scale was 9, his airway was patent with oxygen saturations of 100% and a

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respiratory rate of 30 breaths per minute. His heart rate was 69 beats per minute and irregular, and his blood pressure was 152/108 mmHg. On examination the patient had profound right-sided weakness with upgoing plantars bilaterally.

A clinical diagnosis of cerebrovascular accident was made. An urgent computed tomography scan of the brain did not reveal any acute abnormality.

The patient subsequently became hypotensive. A computed tomography scan of the chest, abdomen and pelvis revealed a dissecting thoracic aneurysm (Figure 1). The patient was stabilized and transferred to the regional cardiothoracic unit, where he underwent successful emergency surgery.

This highlights the importance of adequate initial assessment and regular

reassessment to detect any deterioration, allowing an appropriate response to a potentially fatal diagnosis. [BJHM](#)

**Figure 1. Sagittal section of computed tomography scan showing a type A thoracic aortic dissection.**

