

Spontaneous rupture of a left gastric artery aneurysm

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A 65-year-old man presented with haematemesis. Examination demonstrated a tender and distended abdomen, with a systolic blood pressure of 80 mmHg and haemoglobin level of 11 g/dl. Intravenous contrast-enhanced computed tomography was performed, which demonstrated that there was a ruptured left gastric artery aneurysm (**Figure 1**) and a demonstrable focus of active contrast extravasation into the stomach (**Figure 2**). A diagnosis of spontaneous haemorrhage from a ruptured left gastric artery aneurysm was made according to radiological imaging features.

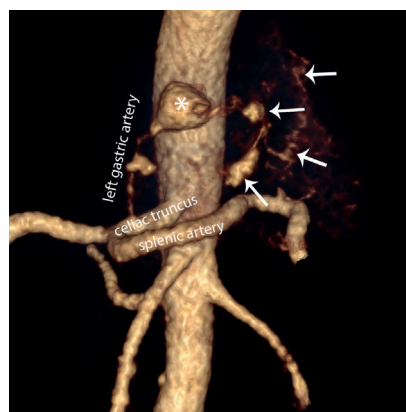


Figure 1. Three-dimensional volume-rendered computed tomography shows left gastric artery aneurysm (asterisk) and contrast extravasation (arrows).



Figure 2. Axial computed tomography scan shows left gastric artery aneurysm (asterisk) and active contrast extravasation (arrow).

Left gastric artery aneurysms are associated with a high rate of rupture and, therefore, high mortality (Gregory et al, 2017). The majority of patients with left gastric artery aneurysms present for the first time with signs of rupture, an acute abdomen and hypovolaemic shock. More rarely, patients may present with haematemesis (Sandstrom and Jha, 2016). Computed tomography is a widely used and accessible form of imaging, which helps with making the initial diagnosis.

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How to cite this article:

Sade R, Cakir O, Ogul H. Spontaneous rupture of a left gastric artery aneurysm. *Br J Hosp Med.* 2021. <https://doi.org/10.12968/hmed.2021.0052>