

SUPERSELECTIVE EMBOLIZATION OF THE MAXILLARY ARTERY FOR THE TREATMENT OF A BLEEDING ARTERIOVENOUS MALFORMATION

EMBOLOGIZAÇÃO SUPERSELETIVA DA ARTÉRIA MAXILAR PARA O TRATAMENTO DE SANGRAMENTO DE UMA MALFORMAÇÃO ARTERIOVENOSA

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A 39 years-old Brazilian Amazon woman was referred to the Department of Vascular Surgery for evaluation of a 6 months history of repetitive episodes of epistaxis. The last episode revealed massive nasal bleeding and required anterior nasal tamponade. Her past medical history was unremarkable for any previous clinical or surgical disease. Clinical examination of the nasal cavity, nasopharynx and oropharynx showed a bleeding mass. Computed tomography of the head and neck confirmed the presence of the mass and arteriography of the right internal carotid artery put in evidence a hypervascularized image in branches of right internal maxillary artery, compatible with the diagnosis of arteriovenous malformation (Figure 1). As no other anomaly were found, the symptoms of bleeding were attributed to it and the patient was submitted to superselective angiographic embolization of the right internal maxillary artery using embospheres of 500-700micra on central nidus of the anomalous malformation. Angiographic control of the procedure showed no images of hypervascularization (Figure 2), and permeability of the right internal maxillary artery. The left external, internal and common carotids were found to be normal. The patient had an uneventful recovery and was discharged home on the first post-operative day. Follow up was normal and, 9 months after the vascular procedure, the patient remains completely free of symptoms.



Figura 1 - Arteriography of the right internal carotid artery. Arrow pointing to the arteriovenous malformation

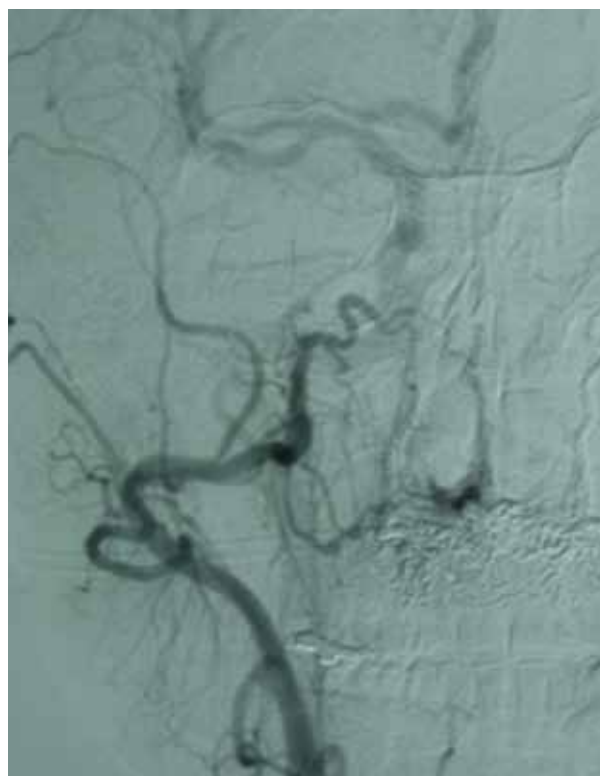


Figura 2 - Post-embolization

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