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Clinical Image

Thrombotic Calcified Aneurysm: Importance of Multimodality Imaging

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Ventricular aneurysms and pseudoaneurysms are one of the most important complications in terms of morbidity and mortality in the spectrum of ischaemic heart disease.

Differentiation between them is mandatory, as this will determine the therapeutic approach, ranging from conservative management to emergency surgery. Multimodal imaging, especially CT (Computed Tomography) and MRI (Magnetic Resonance Imaging), plays a key role in this scenario.

We present the case of a 60-year-old patient with clinical symptoms of heart failure and chronic occlusion of the right coronary artery with an echocardiographic image suggestive of calcified inferoseptal aneurysm.

This finding was confirmed by CT, also showing a filling defect inside the aneurysm suggestive of thrombus; the possibility of pseudoaneurysm could not be ruled out (Figure 1, arrow). To make a differential diagnosis with this entity, an MRI was performed which confirmed the diagnosis of true ventricular aneurysm, intensely calcified, with thrombotic material inside (Figure 2, arrow).



Figure 1: CT.



Figure 2: MRI.

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