

A case of epistaxis

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Abstract: The authors report a case of epistaxis in a 74-year-old male patient. His recent medical history documented recurrent nasal bleeding and a Le Fort 1 osteosynthesis 3 weeks before admission to our unit. A CT scan revealed a left descending palatine artery pseudoaneurysm in the left maxillary sinus, that was successfully embolized. Pseudoaneurysms of the internal maxillary artery and its branches are rare life-threatening complications. This diagnosis should be considered when confronted to recurrent head and neck bleeding, especially in a context of recent maxillo-facial trauma or surgery. Embolization should rapidly be implemented.

A case of epistaxis

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A CT scan revealed a left descending palatine artery pseudoaneurysm in the left maxillary sinus, that was successfully embolized.

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Case presentation:

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3 A 74-year-old male patient was admitted to the emergency department with left-side
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5 epistaxis. Bleeding rapidly resumed, despite left anterior nasal packing, with expulsion of
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Legend:

Figure 1: axial section of the midface CT scan without injection, showing a heterogeneous left maxillary hemosinus.

Figure 2: axial section of the midface angioscan, at a venous phase, showing the aneurism sac in the left maxillary sinus.

Figure 3: arteriography of the left external carotid network. The pseudo-aneurysm is located on the left descending palatine artery, which is a branch of the third portion of the left internal maxillary artery.

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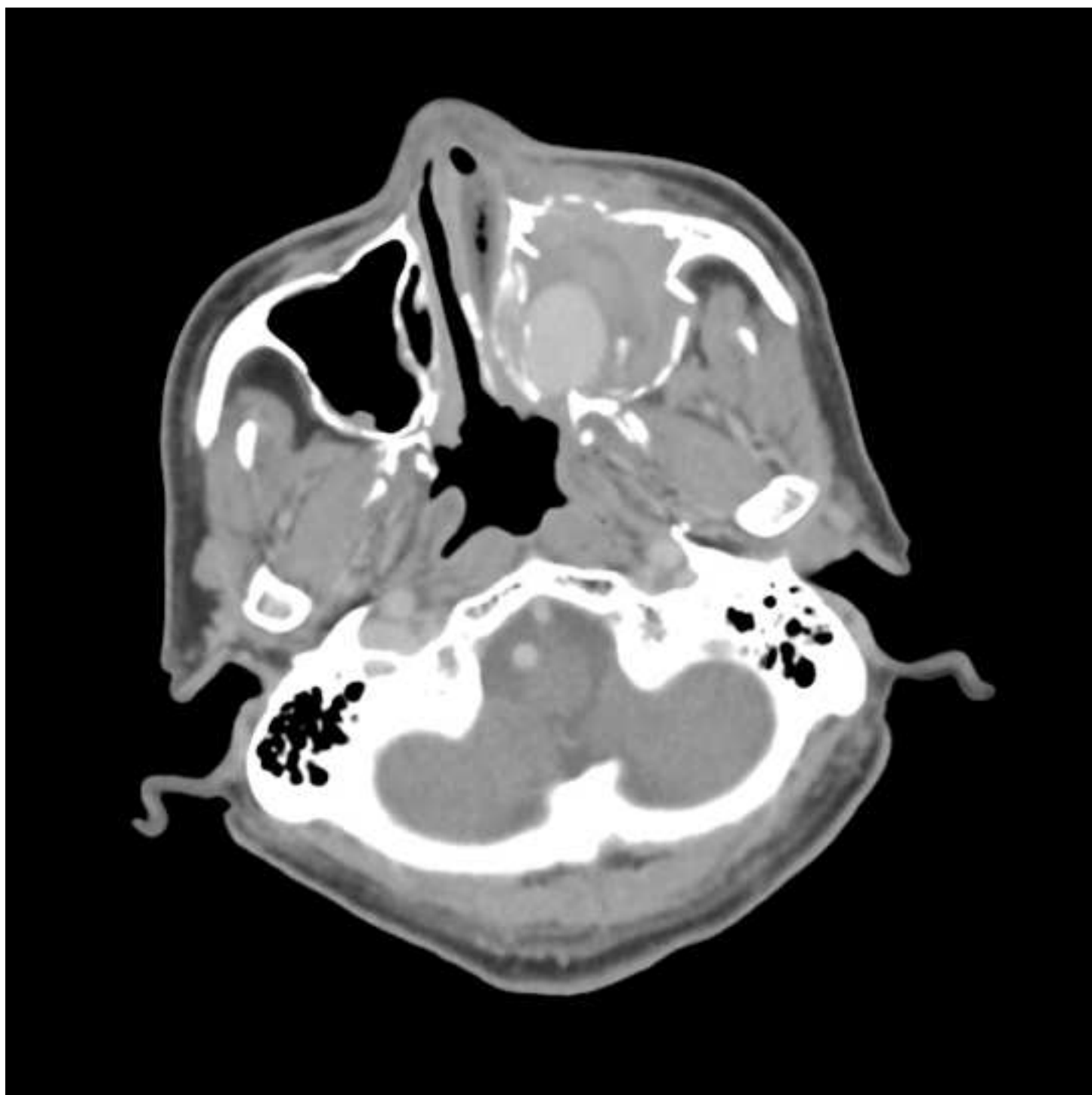
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Figure
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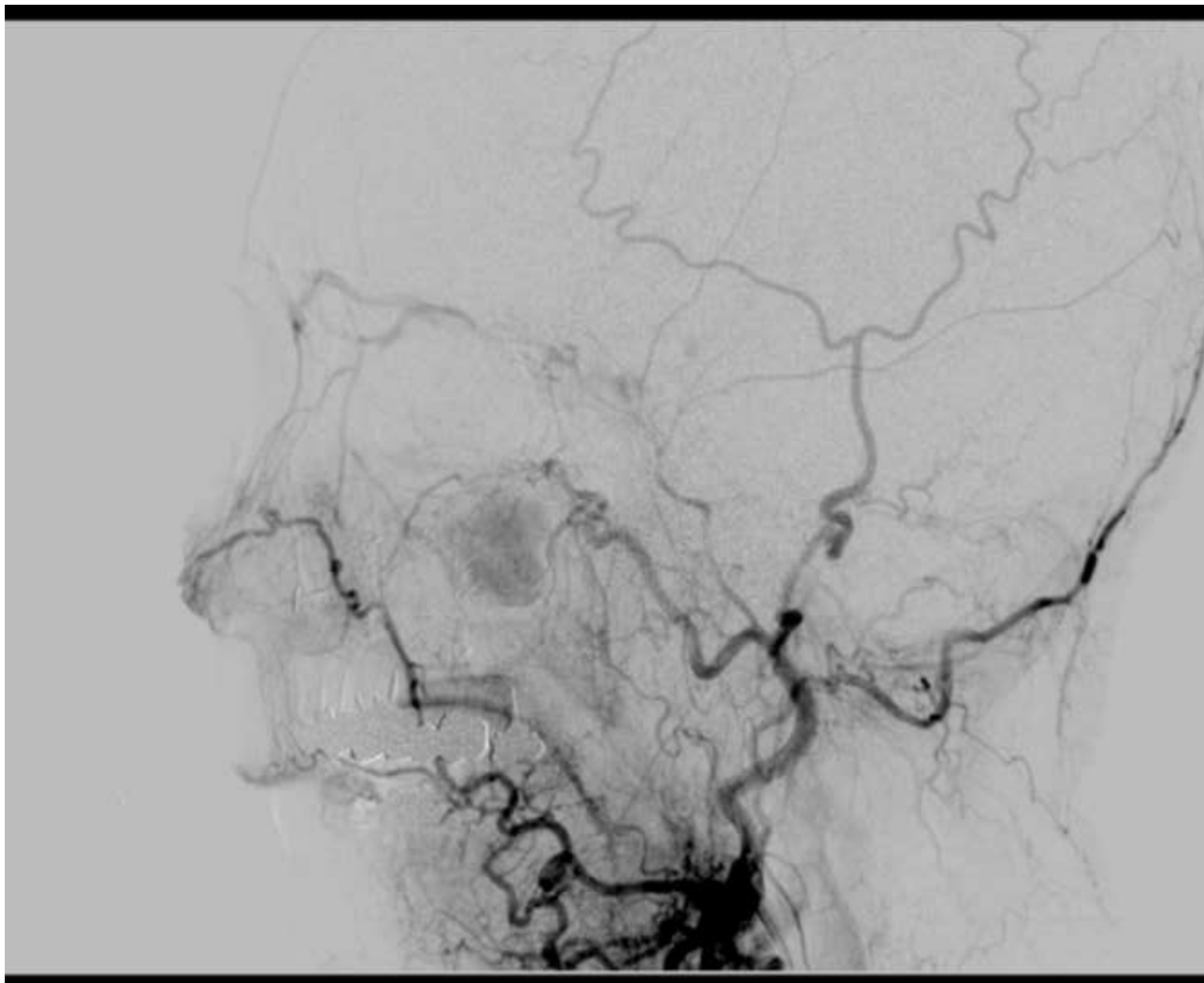


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Response to reviewers

Dear reviewers of the journal of Stomatology, Oral and Maxillofacial Surgery,

The manuscript's English language has been revised, as asked. We hope that the paper, in its present form will fulfill your expectations.

Best Regards,

Alexandre Debelmas