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Case Description

Case 1: A 25 years old male presented to the IR department of shifa international hospital Islamabad with right facial swelling and ipsilateral facial nerve palsy 10 days following an orthognathic surgery.

Case 2: A 30 years old male presented to the IR department of Shifa international hospital with the complaint of episodes of recurrent bleeding from mouth 10 days after maxillary Lefort I osteotomy.

Case 1



Figure 1: Angiography image of lateral view of right external carotid artery showing pseudoaneurysm in proximal segment of right maxillary artery

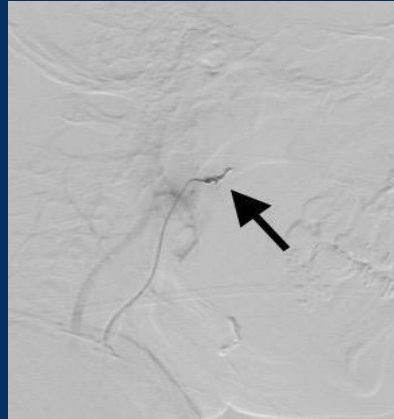


Figure 2: coil embolization of pseudoaneurysm.

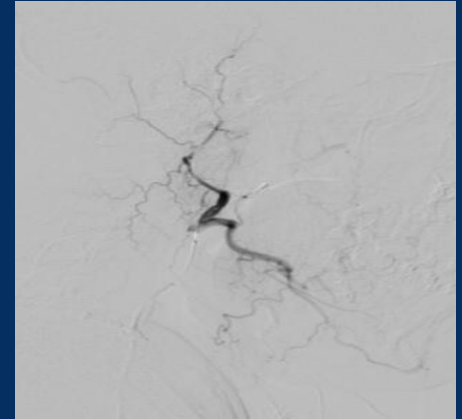


Figure 3: Non visualization of pseudoaneurysm following coil embolization.

Case 2



Figure 1: Lateral view right external carotid artery showing pseudoaneurysm arising from posterior superior alveolar branch of right internal maxillary artery.



Figure 2: Coronal view of right internal maxillary artery showing coil embolization proximal and distal to the origin of pseudoaneurysm.



Figure 3: Non visualization of pseudoaneurysm following coil embolization.

Discussion

Maxillary artery pseudoaneurysm is a very rare complication of orthognathic surgery, a surgeon should be extremely cautious while operating on this area and look for any intraoperative bleed. Although different treatment options are available for pseudoaneurysms, endovascular embolization is reported to be the superior one. In the current cases, the minimally invasive endovascular embolisation technique was used utilising coils with no complications and good outcomes.