CLINICAL IMAGING

Hepatic and Splenic Arteries' Pseudoaneurysms Causing *Hemosuccus Pancreaticus*

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A 63-year-old woman was transferred to our institution with obscured intermittent gastrointestinal bleeding for consideration of capsule endoscopy. Her past medical history significant for was idiopathic chronic pancreatitis, complicated by pancreatic Several upper and lower pseudocysts. endoscopies failed to identify any source of bleeding. CT scan of abdomen with intravenous contrast demonstrated chronic pancreatitis with 2 pseudocysts in the head and body of the pancreas. There were two pseudoaneurysms identified, one arising from the common hepatic artery communicating with one of pseudocyst (Image 1, solid arrow) and the other arising from the splenic artery communicating with main pancreatic duct in the tail of pancreas (Image 1, double arrow). underwent selective Patient celiac angiography, which confirmed the



Image 2

pseudoaneurysms (Image 2). The coil embolization of the common hepatic artery and the splenic artery were successfully performed to occlude the pseudoaneurysms (Image 3). No further gastrointestinal bleeding recurred following the procedure.



Image 1

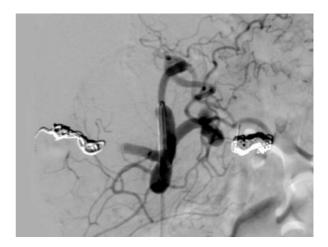


Image 3

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