

CADUCEUS OF THE HEART

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A 54-year-old male patient complaining of chest pain was referred to our clinic for coronary artery bypass graft (CABG) surgery after conventional coronary angiography (CCA). His medical history was notable for smoking and hypertension. In CCA, occluded left anterior descending (LAD) artery, and critical intermediary artery stenosis were detected (Fig. 1A). In the right coronary system, “caduceus” like anastomosis was seen between the LAD and posterior descending (PDA) branch of the right coronary artery (RCA) (Fig. 1B and 1C). After

median sternotomy, two vessel CABG was performed under cardiopulmonary bypass. During the operation, endarterectomy was performed in the LAD diagonal artery region (Fig. 1D). The endarterectomy material was carefully excised from this area (Fig. 1E). The relationship between LAD and PDA was also observed surgically (Fig. 1F). Various collaterals have been described in the literature in patients with coronary artery disease. This current case has been defined as “caduceus of the heart”.

Figure 1 |

