

Clinical Image

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Transcatheter arterial embolization of the left inferior adrenal artery hemorrhage**Kasuga Takeshi***

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Description

A 64-year-old man was brought to the Emergency Department after a sudden onset of severe left back pain. His medical history revealed human immunodeficiency virus (HIV) and pneumocystis pneumonia (PCP). Abdominal echocardiography and contrast-enhanced computed tomography (CT) scan showed adrenal hemorrhage, and an emergency interventional radiology (IVR) was performed. IVR images are shown in Figure 1. Bleeding from the left inferior adrenal artery was shown and hemostasis by transcatheter arterial embolization (TAE) (Figure 2) was performed. The cause of the hemorrhage was unknown, various culture results were negative, and the CT showed no neoplastic lesion. His serology was negative for pheochromocytoma and coagulation studies were normal and with no history of trauma. He progressed stably postoperatively and was discharged on the 14th day of hospitalization.

Bleeding of the inferior adrenal artery is a rare condition [1], especially in the absence of underlying conditions such as

trauma, sepsis, anticoagulant use, hematologic abnormalities, pregnancy, adrenal tumors, or adrenal metastases of malignant tumors [2]. In addition, surgical hemostasis is usually indicated in most of these cases [3], and it is rare that hemostasis is achieved by IVR as in this case. This case is a simple but extremely valuable experience.

References

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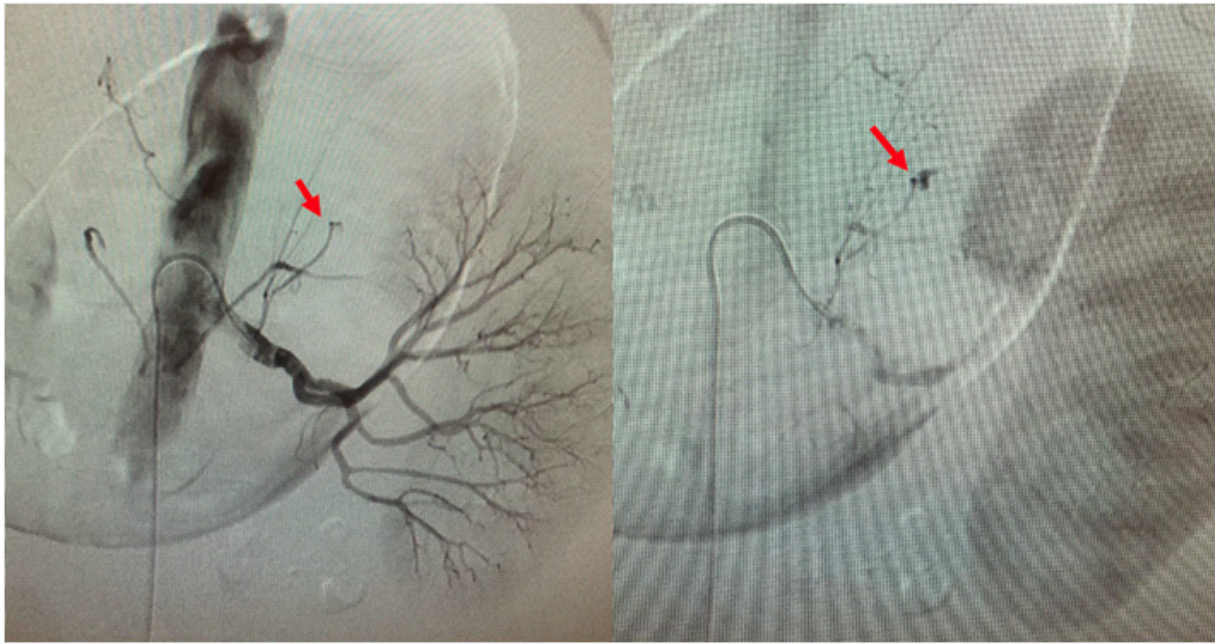


Figure 1: Vessels are identified by IVR (left). Hemorrhage from left inferior adrenal artery with extravasation (right).



Figure 2: TAE to left inferior adrenal artery (left, center). After that, confirmed hemostasis (right).