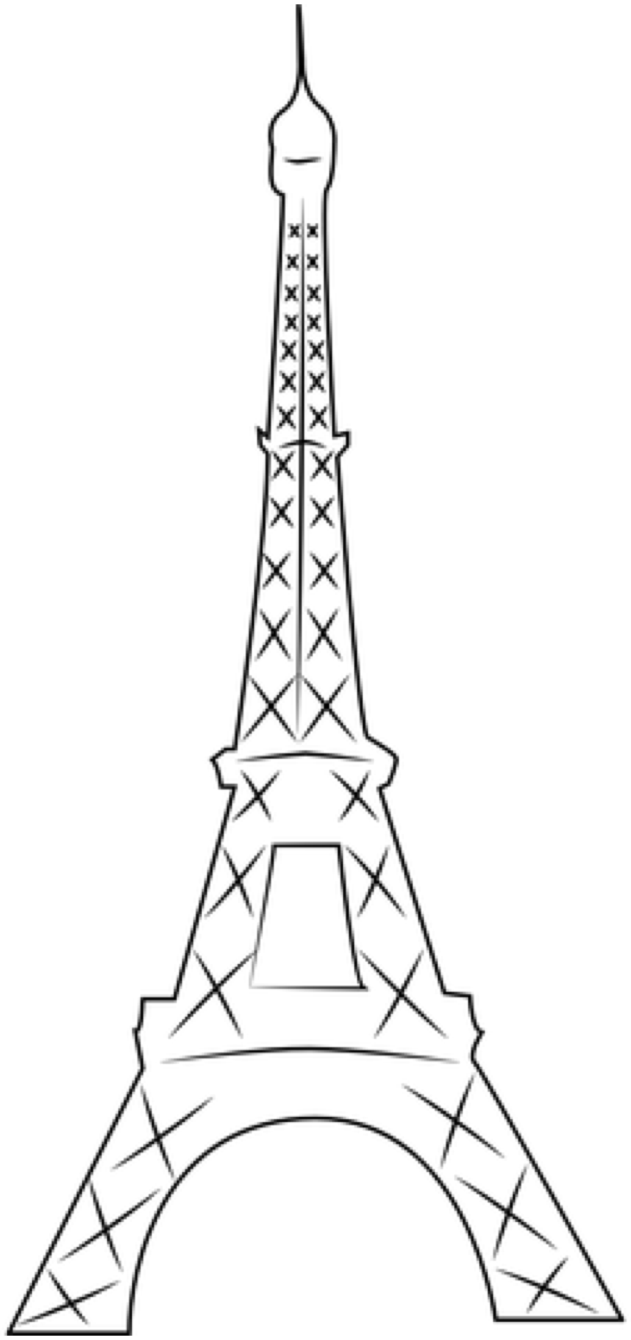


Controversies & updates in Vascular Surgery

Paris - february 09 2019

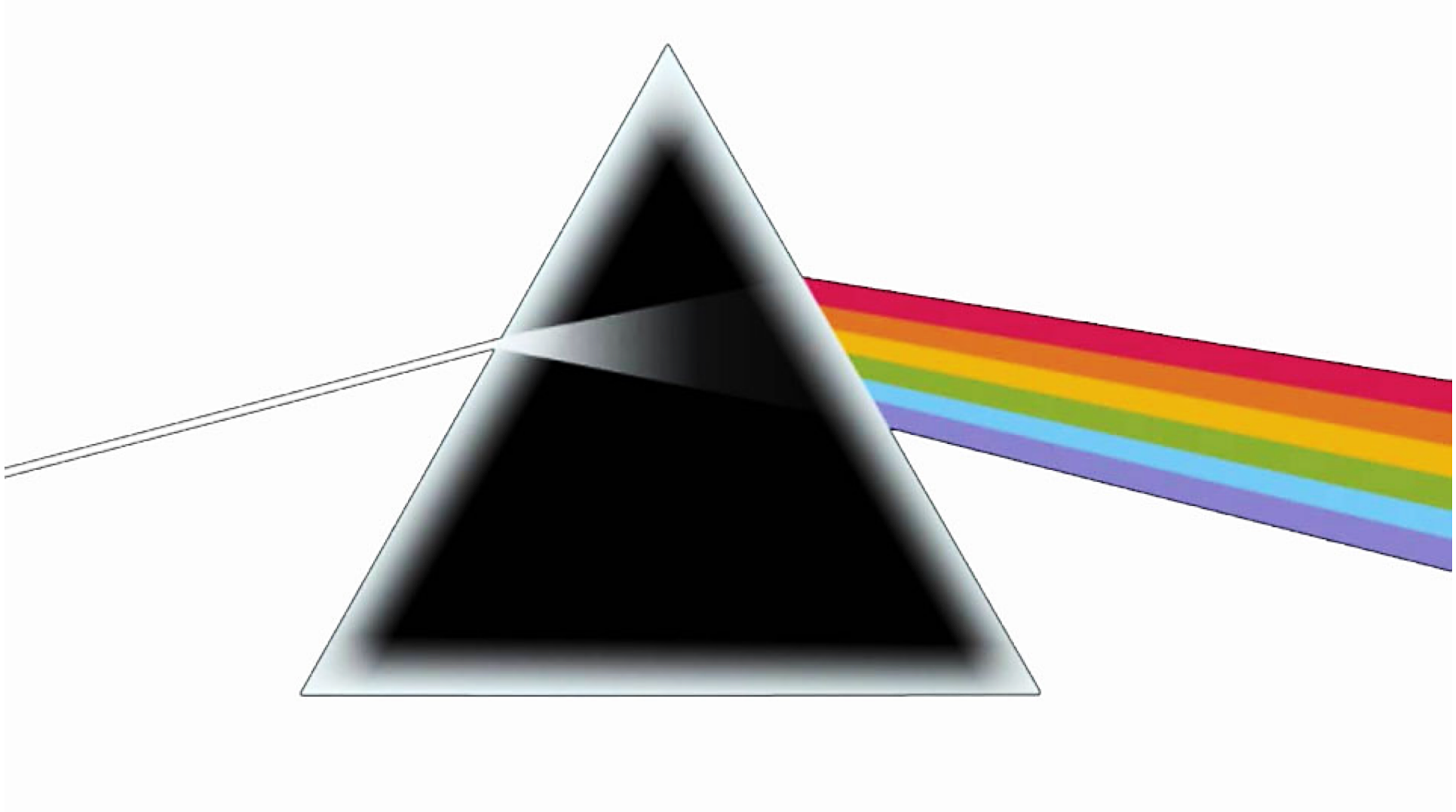
Venous session

Venous oddities

duplex image

Philippe LEMASLE

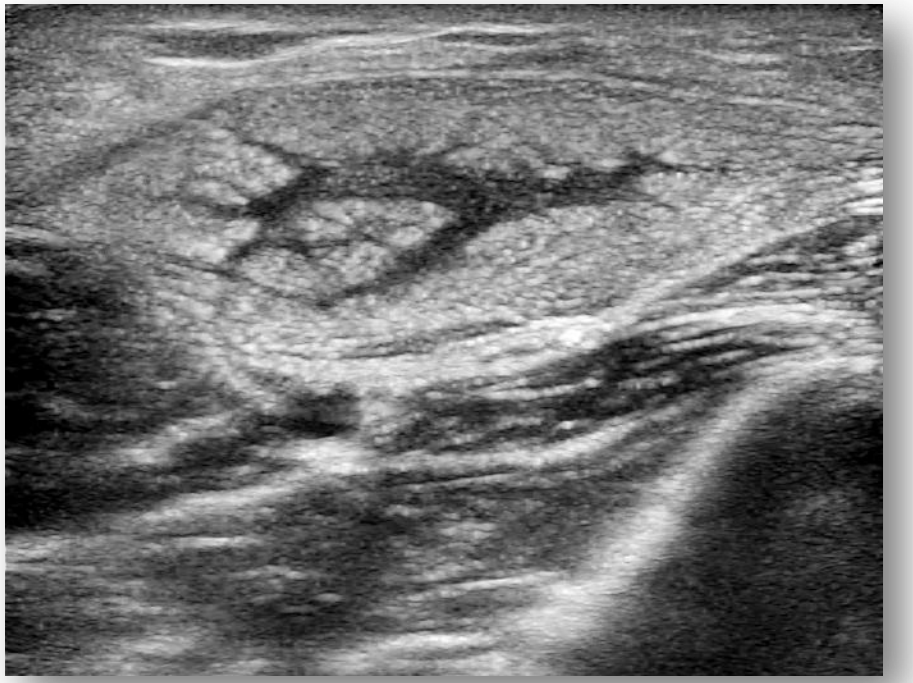
Le Chesnay - France



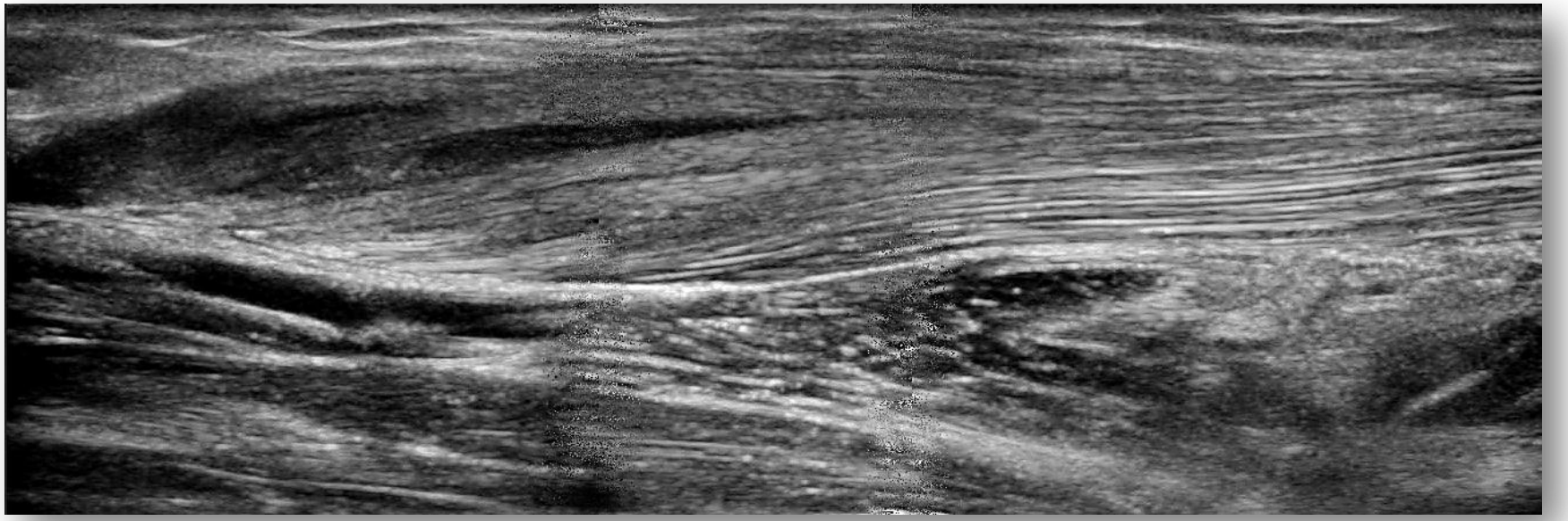
I have no financial relationship to disclose

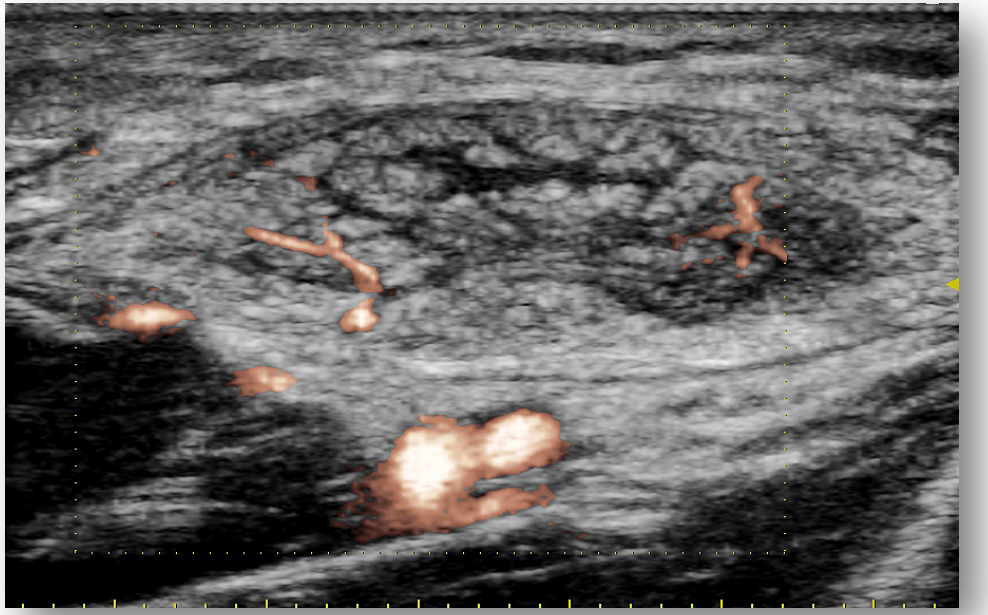
- 56 year old woman
- *oct 11th 2013* : pain and swelling of the anterior side of the forearm G
  >> alcoholic bandage
- volume increase
- no spontaneous pain
- pain caused by :
  - extension of forearm
  - manual pressure
- no triggering factor : no specific activity, no trauma
- no febrile syndrome
- ATCD : stenting RRA - HTA with fibroangiodyspasia

>> *oct 16th 2013 : duplex scan*

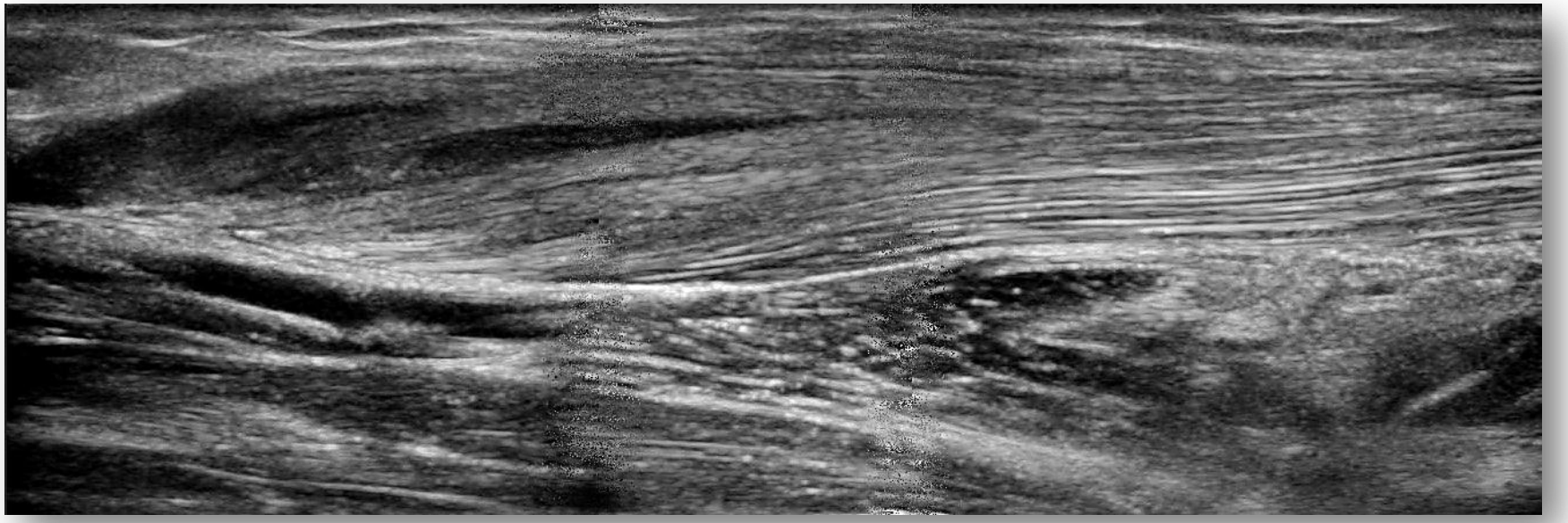


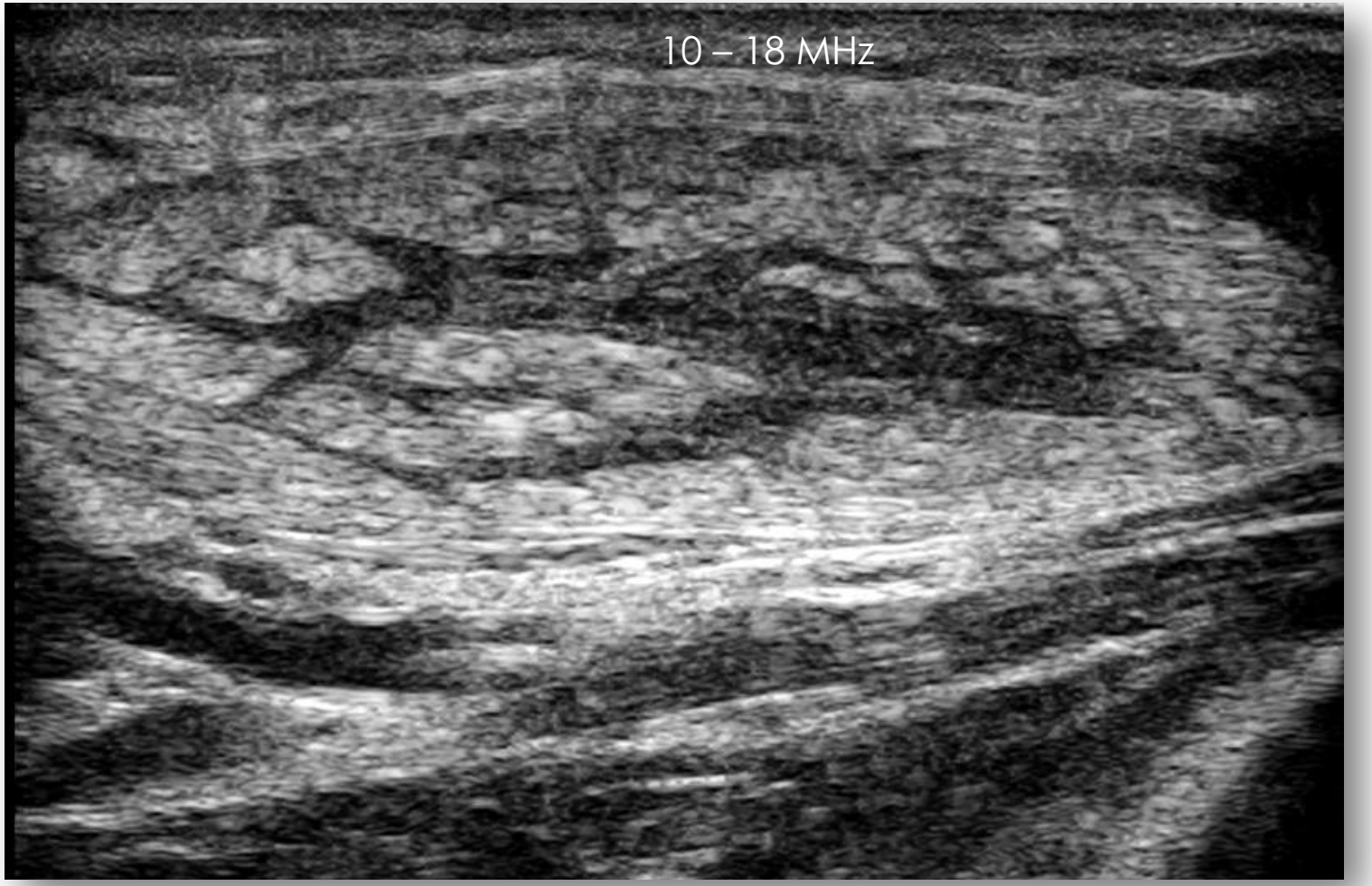
- anterolateral side of the forearm
- tissue mass developed within the brachio-radial muscle
- echogenic, without fibrillar architecture
- respect for muscle aponeurosis



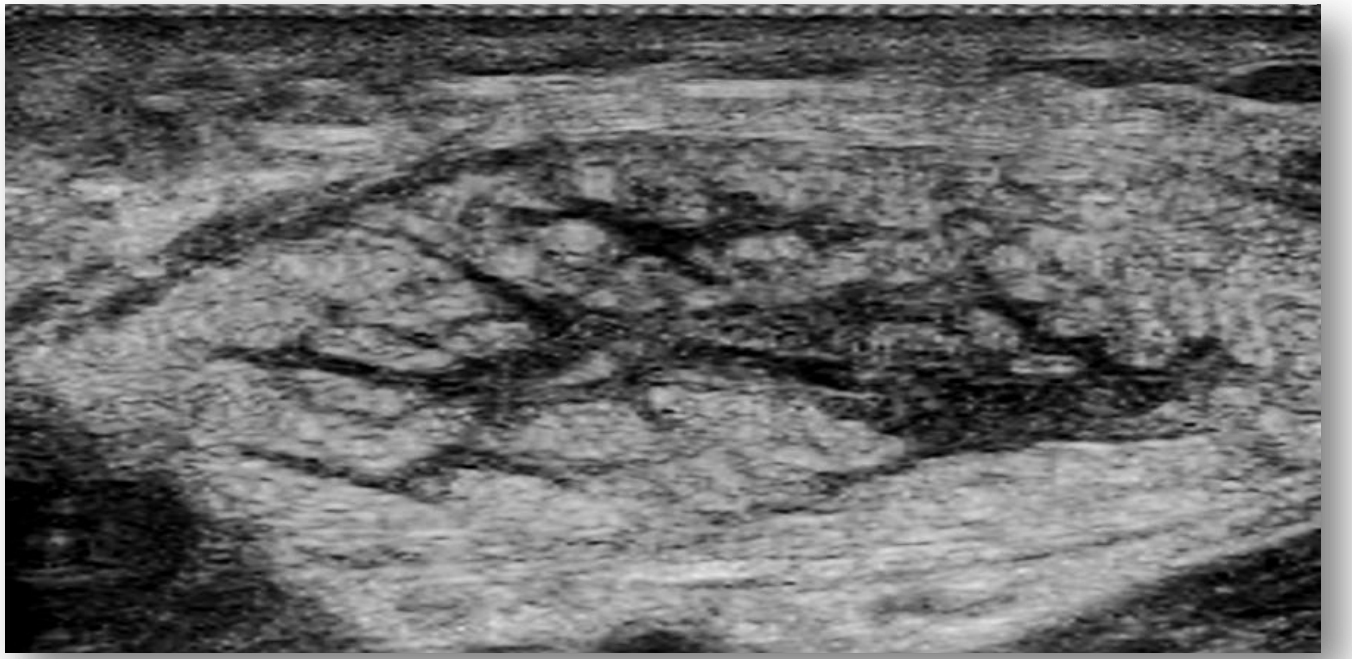


- low vascularity mass
- in contact with radial vessels
- normal flows

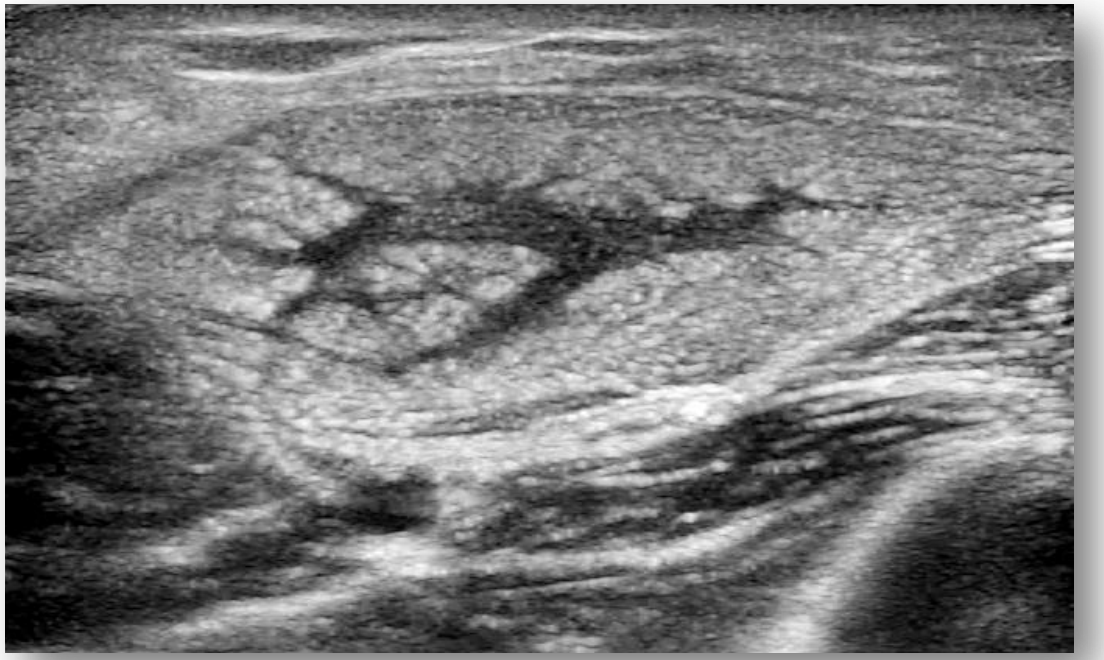




- echogenic tissue mass without fibrillar architecture
- but presence of linear hypoechogenic trabeculae
- arborization with main trabeculae and branches



10 – 18 MHz



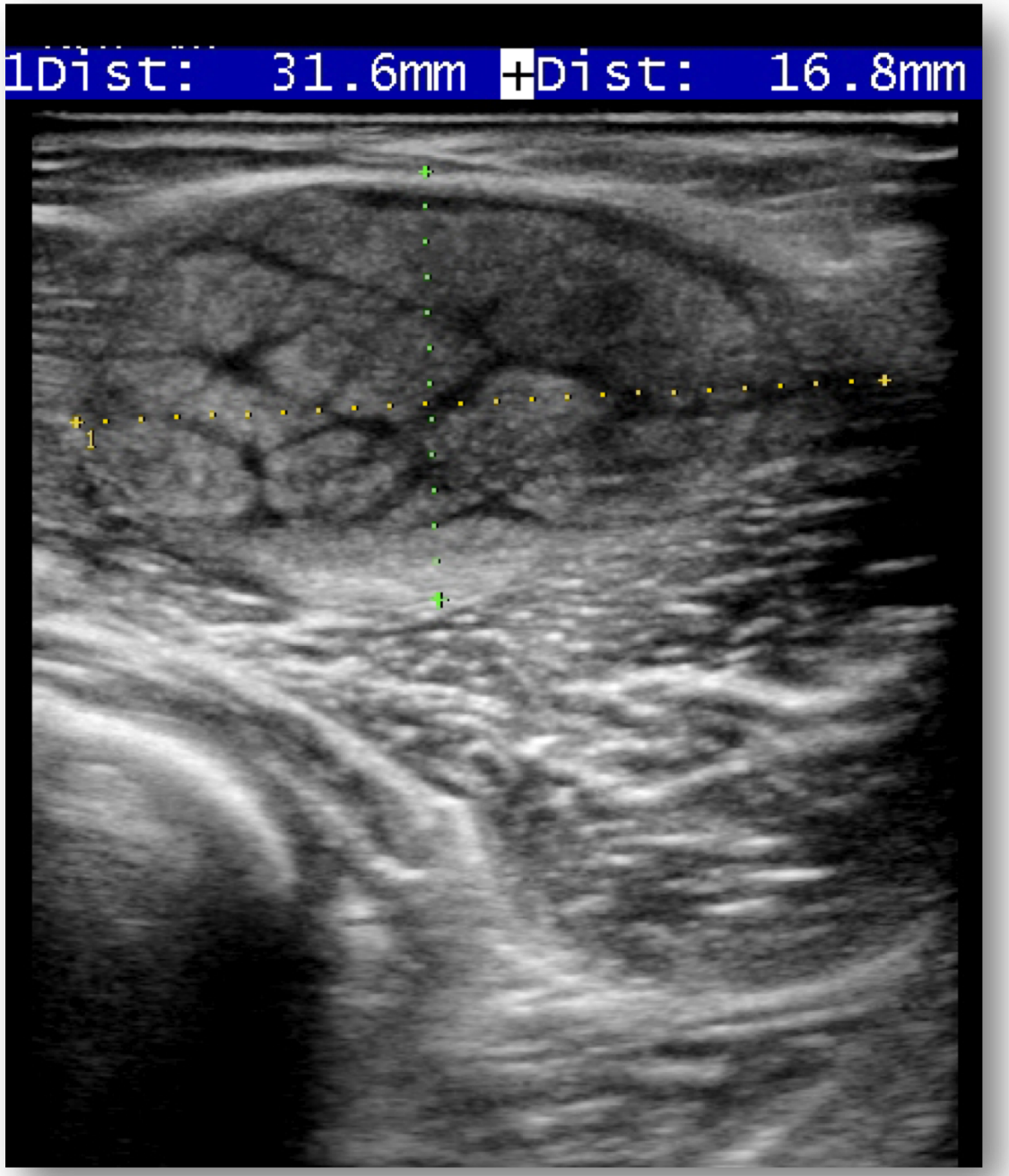
10 – 16 MHz

- 82 year old woman

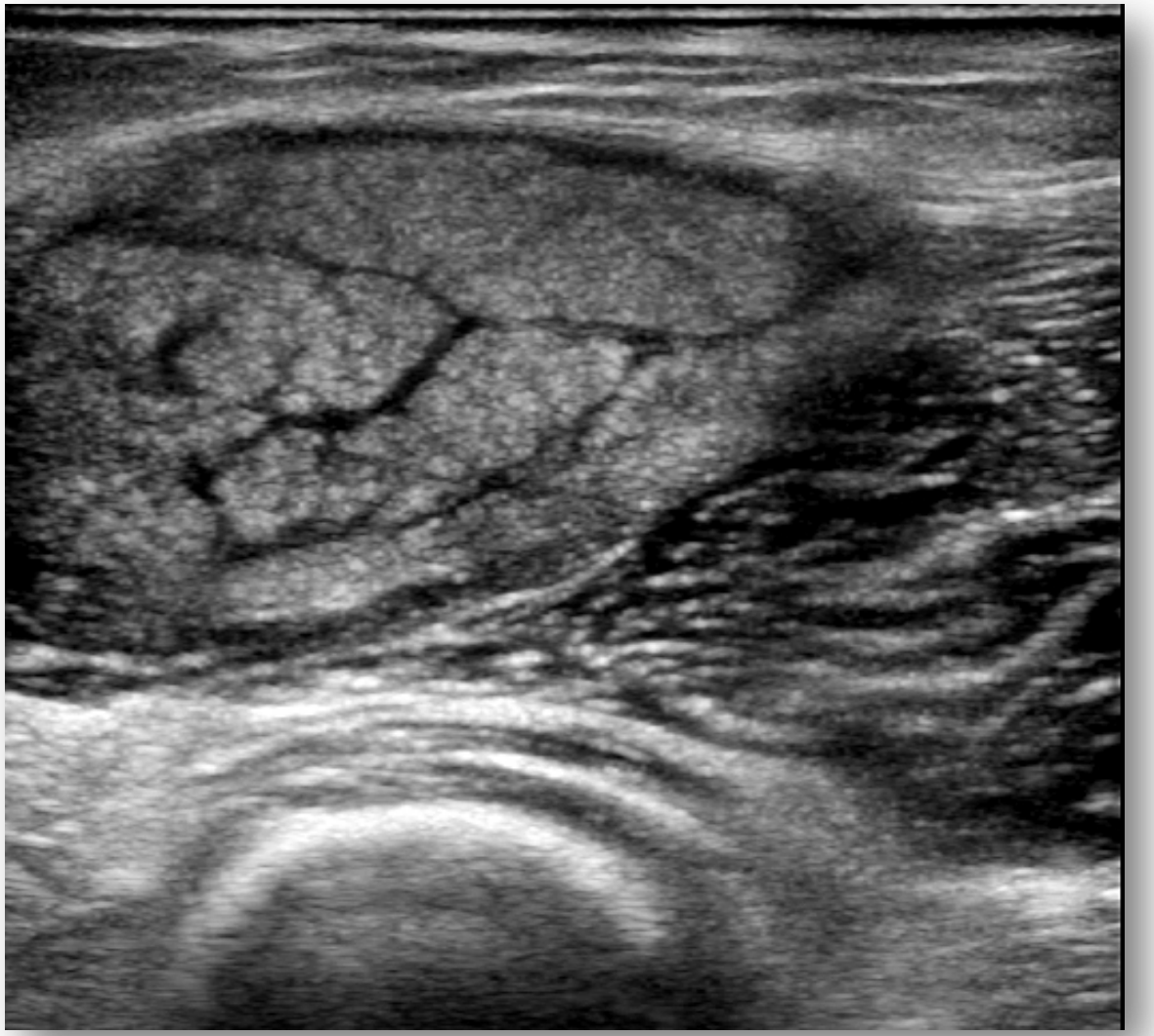
- *dec 2015* : since 15 days ago, redness and swelling of the anterior side of the forearm D
- progressive spontaneous regression of edema
- disappearance of pain
- but appearance of a though, limited tumescence
- no febrile syndrome
- no triggering factor : no specific activity, no trauma

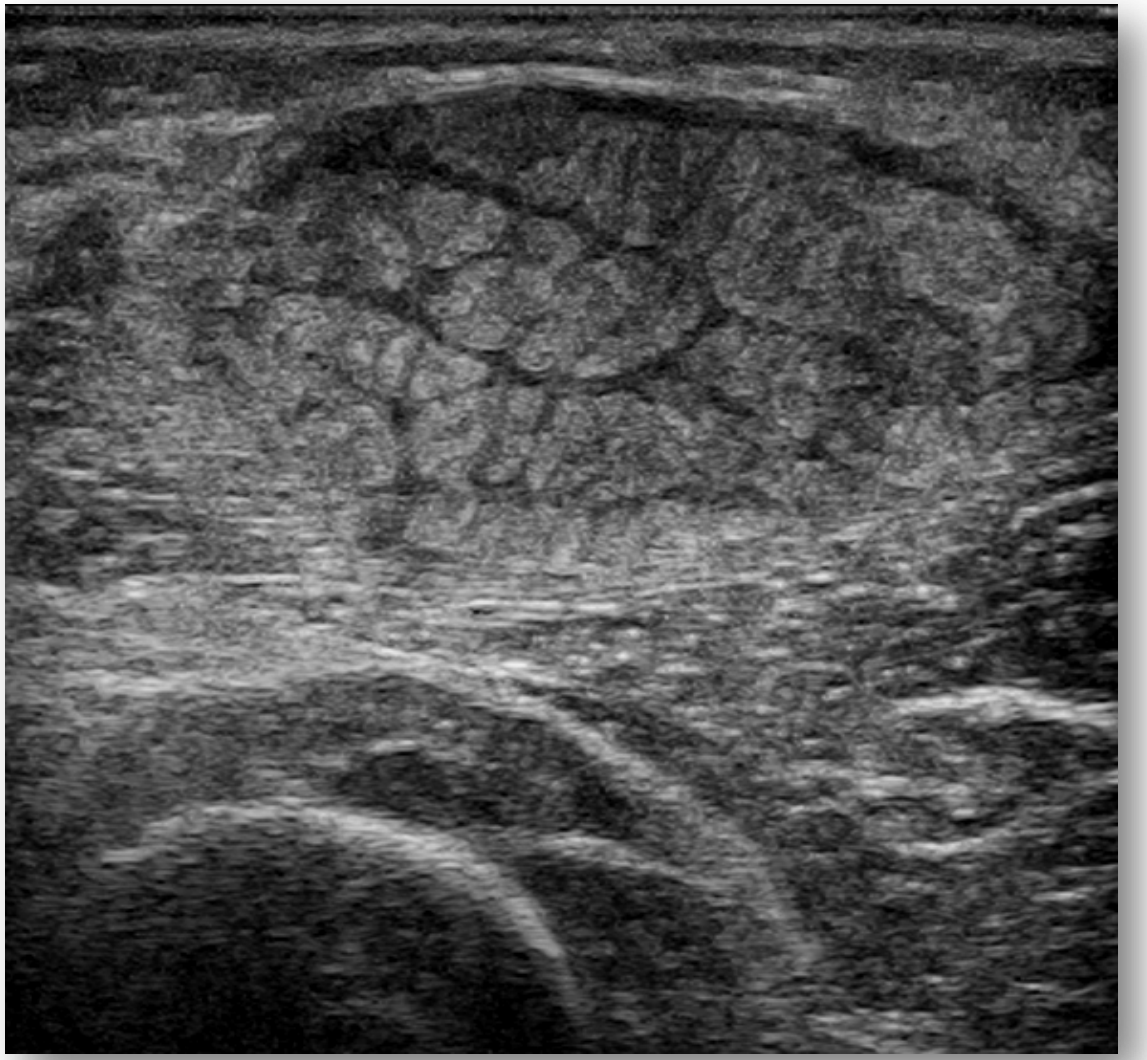
- ATCD :
  - smoking > 60 years, BPCO, HTA
  - ATCD thromboembolic disease = 0

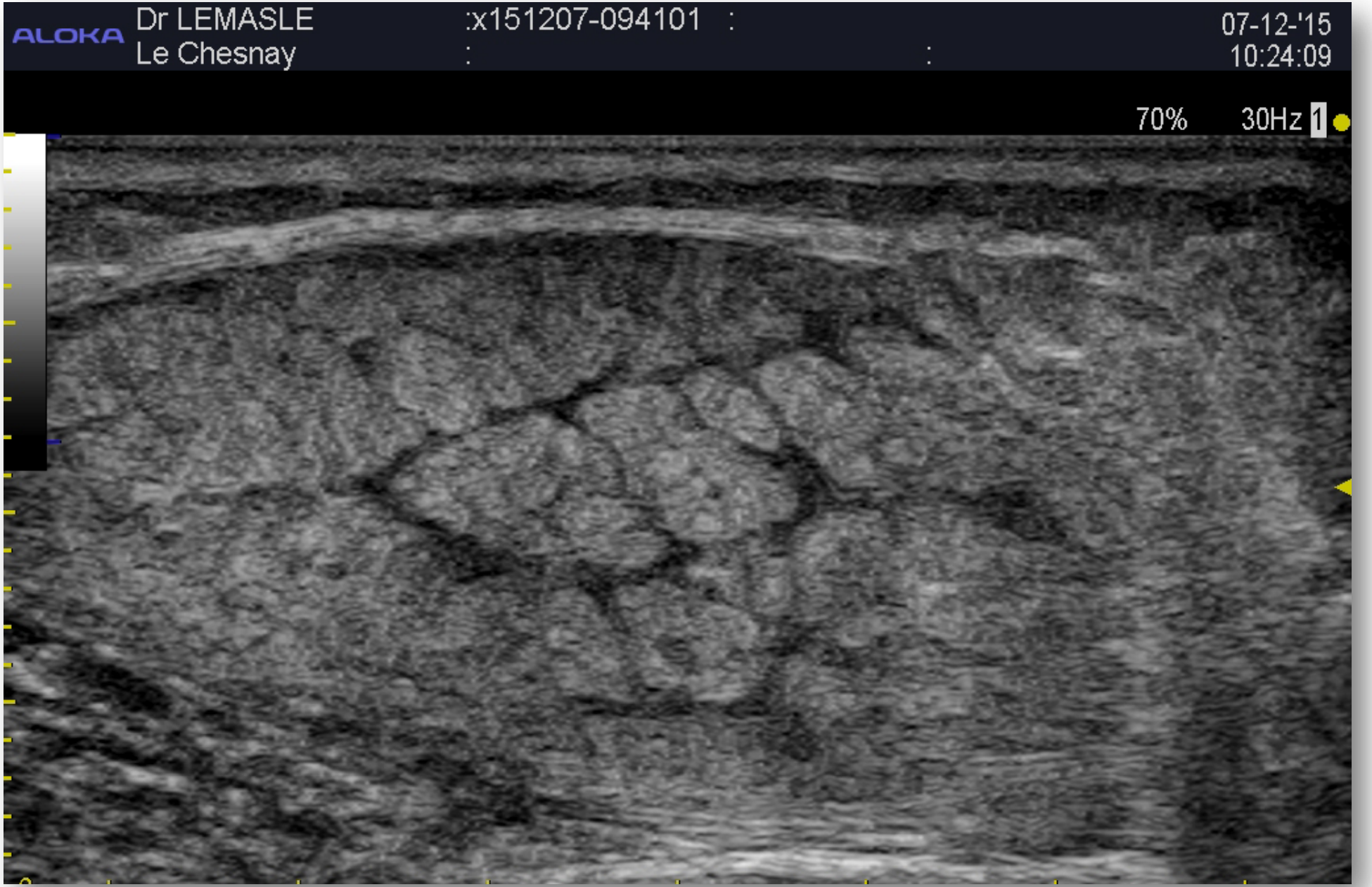
>> *dec 12th 2015* : *duplex scan*



- anterolateral side of the forearm
- tissue mass developed within the brachio-radial muscle
- echogenic, without fibrillar architecture
- respect for muscle aponeurosis
- partitioned mass by linear hypoechogenic trabeculae

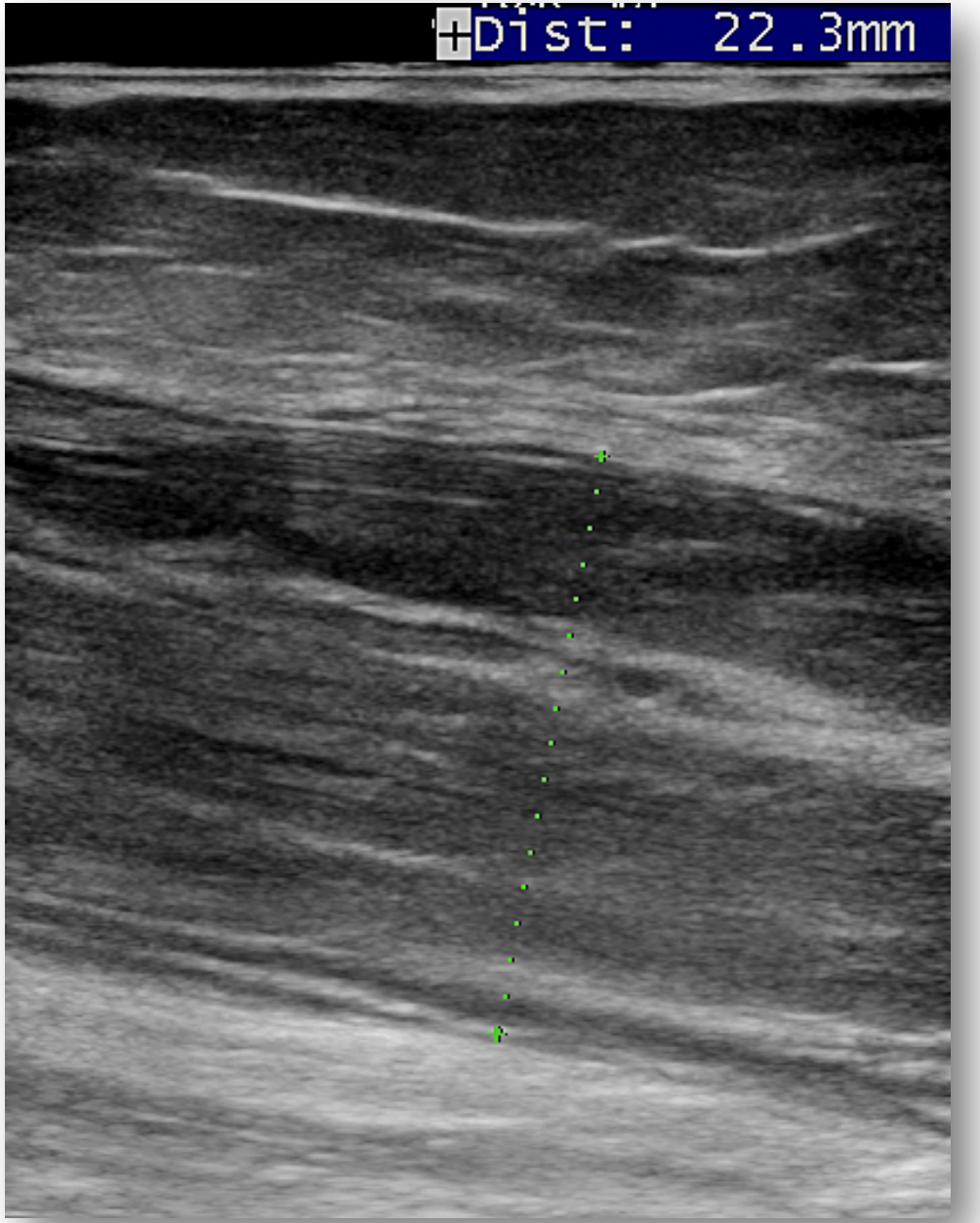


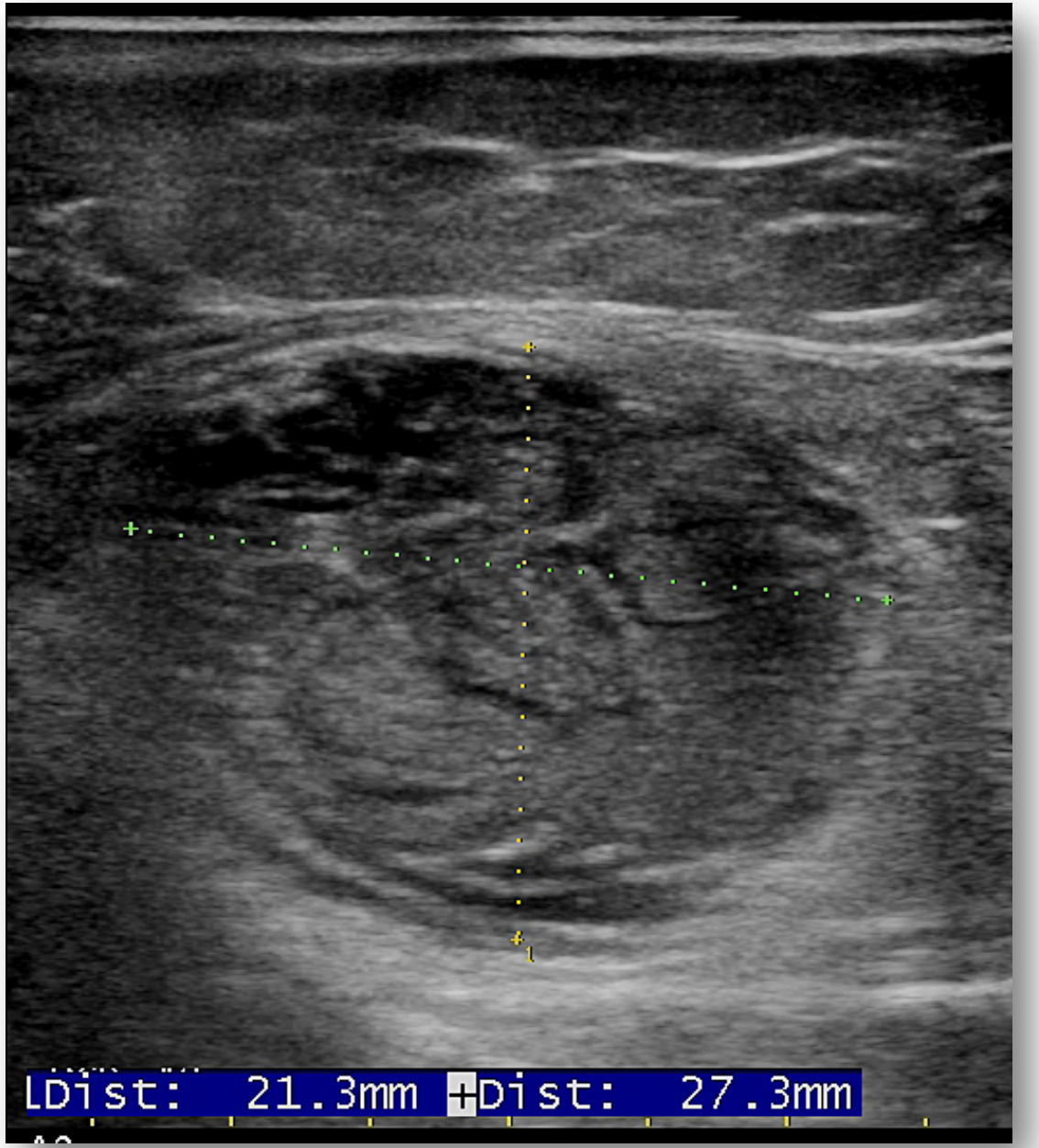


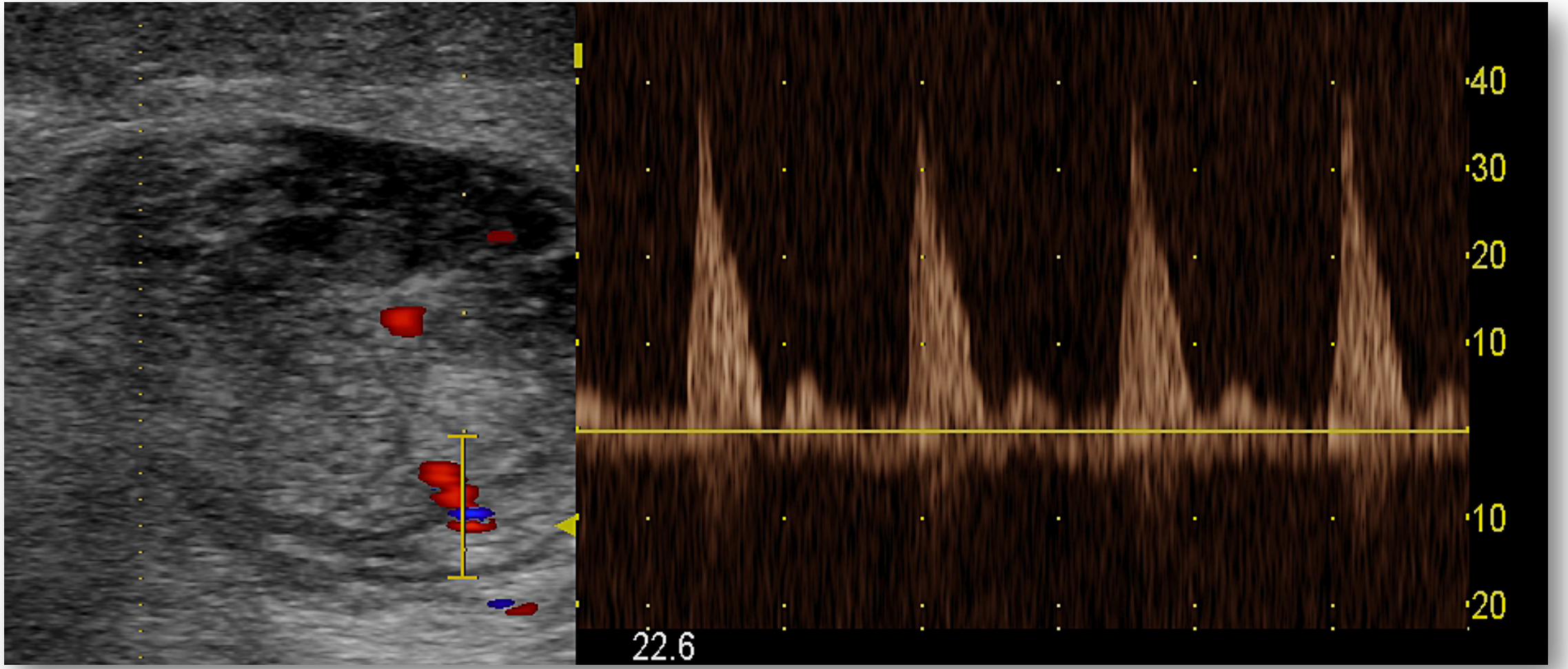

ALOKA
Dr LEMASLE
Le Chesnay
:x151207-094101 :
:
:
07-12-'15
10:24:09
70%
30Hz
1

- 58 year old woman
- ATCD thromboembolic disease = 0
- jan 15th 2015 : pain in the medial side of the thigh
- aggravation of pain
  - limping when walking
  - limitation of flexion of the thigh
- no triggering factor : no specific activity, no trauma
- no febrile syndrome
- ATCD :
  - *1999* : surgery GVS gauche
  - ATCD thromboembolic disease = 0

>> *jan 21th 2013 : duplex scan*


Dist: 22.3mm


LDist: 21.3mm
Dist: 27.3mm


40
30
20
10
10
20
22.6

jan 23th 2013 : MRI of both thighs

jan 23th 2013 : MRI of both thighs

= hypersignal in STIR et enhancement after gadolinium injection

= inflammatory aspect of the left gracile muscle and fascia of the large adductor and semi-membranous

Focal myositis

= *benign inflammatory pseudotumor myopathy of skeletal muscle*

- *unknown prevalence inconnue* ≈ *115 known cases*
- characterized by localized tumefaction of skeletal muscle
  - usually MI : abductors, vast lateral, gastrocnemius
  - *sometimes in the cranial or cervical musculature*
- generally spontaneous regression
- possible recurrence possible (18% of cases)
- etiology ?
  - trauma
  - genetic factors
  - viral infection
  - autoimmune disease

Heffner RR. Focal myositis. Cancer 1977; 40 : 301-6

Focal myositis

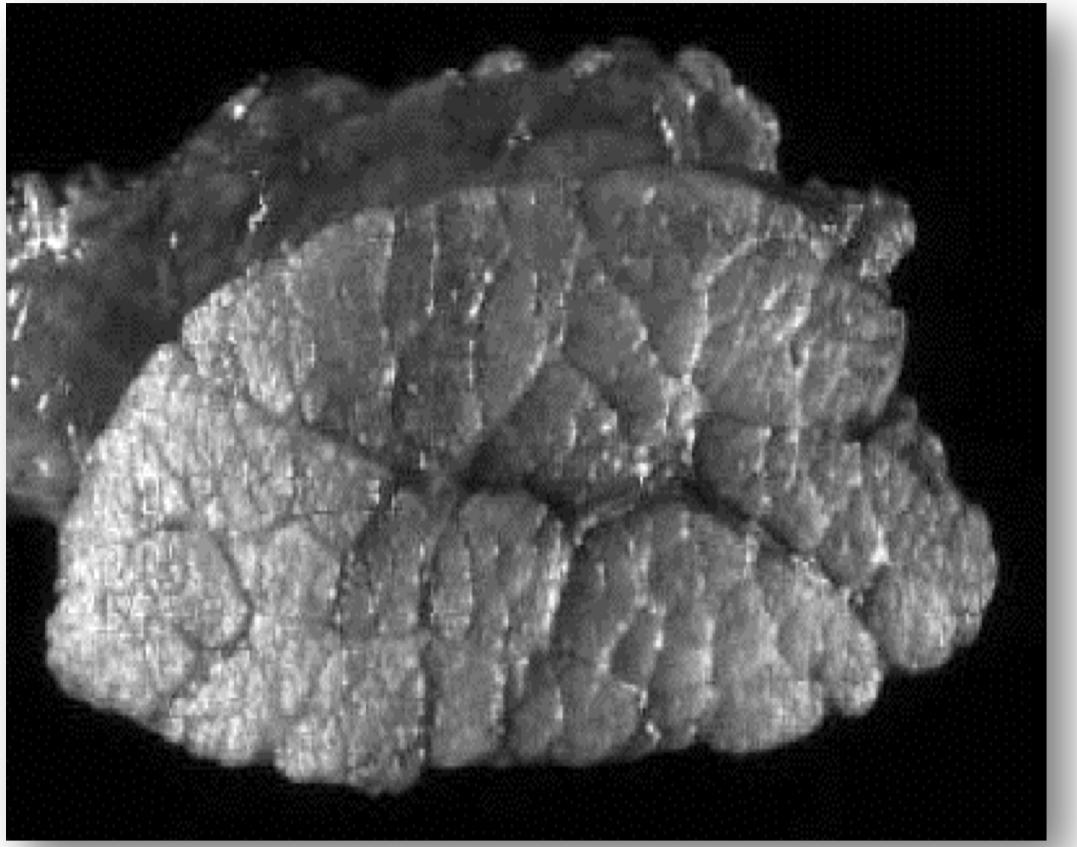
- clinical presentation = localized enlargement of a muscle
- *biology* = ↑ *creatinine kinase, inconstant and moderate*
- *MRI*
  - ↑ *signal intensity*
  - *hypertrophy of affected muscle*
- *histology*
  - *chronic inflammation*
  - *fibrosis*
  - *myopathiqc remodeling, myophagocytosis*
- treatement = NSAI & corticotherapy if pain ou inflammation +++
- very good prognosis

Elisabeth RUSHING - https://www.orpha.net/consor/cgi-bin/OC_Exp.php?Lng=FR&Expert=48918

Focal myositis

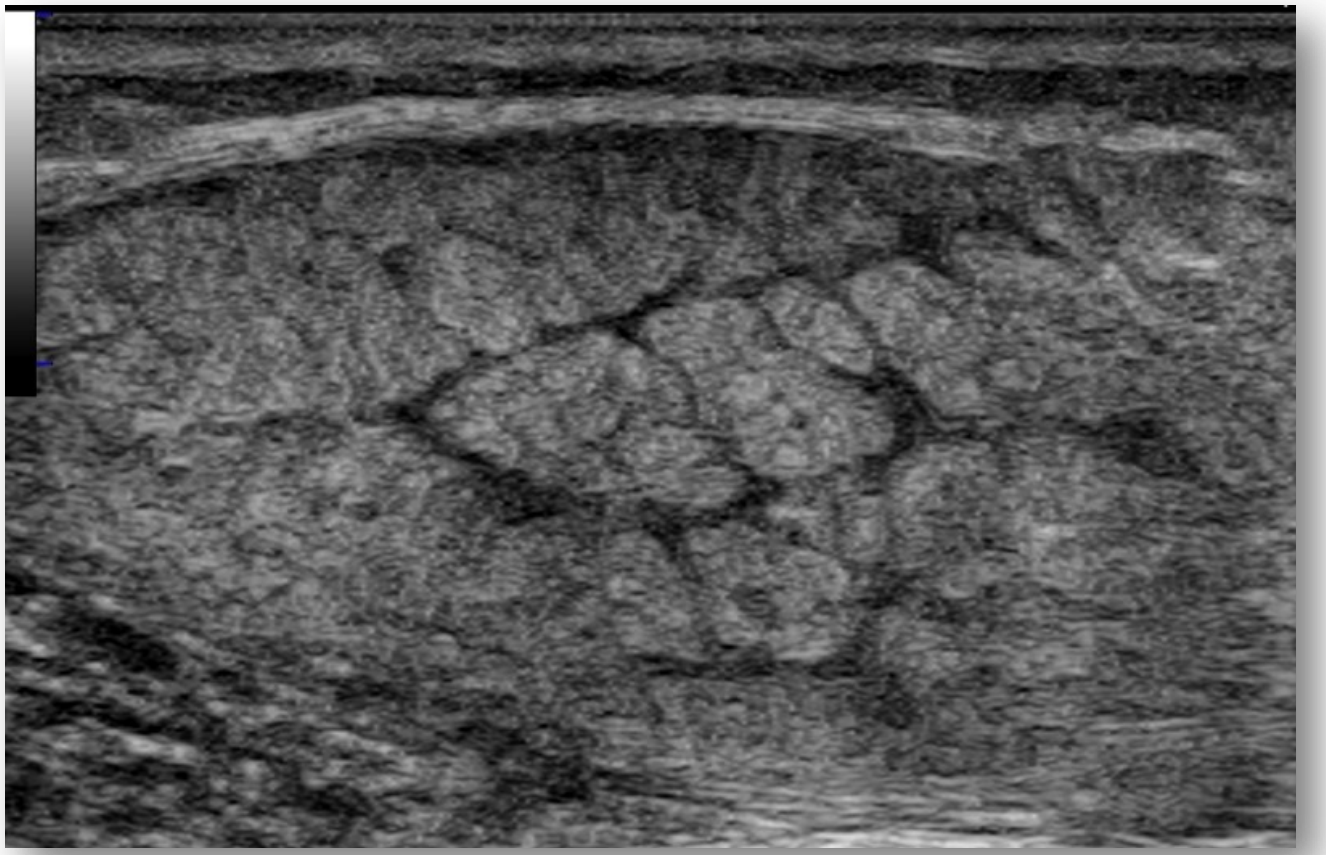
- differential diagnosis
  - *soft tissue sarcoma*
    - *rhabdomyosarcoma*
    - *liposarcoma*
    - *leiomyosarcoma*
  - *intramuscular lipoma*
  - *inflammatory myofibroblastic tumor*
  - *progressive ossifying fibrodysplasia*
  - *rhabomyoma*
  - *lymphoma*
  - *fibromatose*

Elisabeth RUSHING - https://www.orpha.net/consor/cgi-bin/OC_Exp.php?Lng=FR&Expert=48918



Llauger J. Skeletal Radiol 2002;31: 307-10

- surgical resection - sectionned gross specimen
- biceps femori muscle



case 2

- ultrasound appearance
- brachio-radial muscle

Controversies & updates in Vascular Surgery

2019