

# Coexistence of Venous Angioma and Saccular Aneurysm

## Venöz Anjiom ve Sakküler Anevrizmanın Beraber Görülmesi

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**Abstract:** A patient disclosed a saccular anterior communicating aneurysm and a frontobasal venous angioma was presented. Up to our knowledge this condition is rare and a common embryogenetic origin can not be hypothesized. It may have clinical significance during determination of the surgery.

**Key Words:** Saccular aneurysm, venous angioma

**Özet:** Sakküler anterior komünikan anevrizması ve frontobazal venöz anjiyomu olan bir hasta sunulmuştur. Bilgilerimize göre bu durum nadirdir ve genel embriyogenetik hipotezlere uymamaktadır. Ancak, cerrahinin değerlendirilmesinde klinik önemi olabilir.

**Anahtar Sözcükler:** Sakküler anevrizma, venöz anjiyom

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### Case Illustration

A 55-year-old female was referred to our clinic eleven days after subarachnoid hemorrhage. The patient was neurologically intact, except for mild headache. Diagnosis was confirmed by computerized tomography at the primary medical institution. The patient underwent digital subtraction angiography. Left carotid angiogram

disclosed a saccular anterior communicating aneurysm, and a frontobasal venous angioma (Figs. 1 and 2). Right carotid and vertebral angiograms were normal. Aneurysm which visualized predominantly by left carotid injection was clipped through a left pterional craniotomy. Patient was discharged after an uneventful postoperative period.

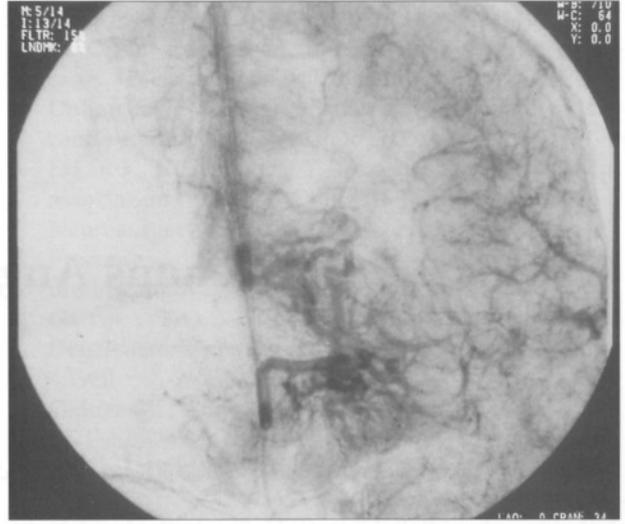
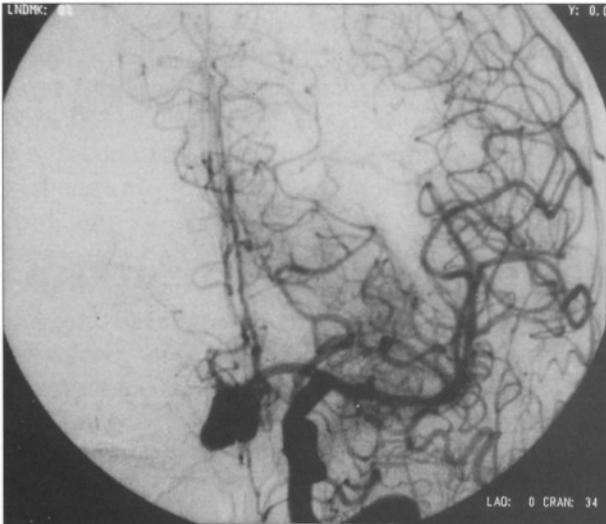


Figure: 1 Left carotid angiogram demonstrating anterior communicating artery saccular aneurysm (left), and left frontobasal venous angioma (right).

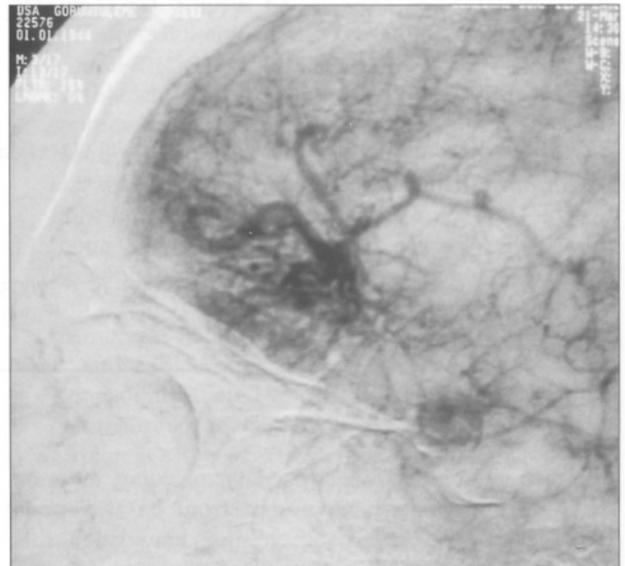
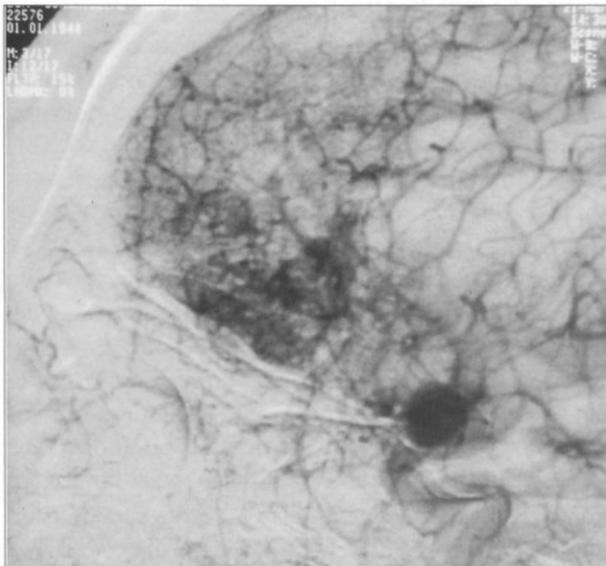


Figure 2: Magnified lateral projection images of left carotid angiogram sequentially demonstrating venous angioma and aneurysm (left), and typical venous angioma configuration (right).

### DISCUSSION

Coexistence of venous angioma and aneurysm is a rarity. Only one case was reported by Tashiro et al. (1). This condition seems to be purely incidental. A common embryogenetic origin can not be hypothesized on the basis of our present knowledge on pathogenesis of these lesions.

This condition may have clinical significance only if 1) Venous angioma site necessitates special consideration in determination of surgical approach, 2) Venous angioma site complicates aneurysm surgery, or 3) Hematoma origin remains obscure due to close proximity of two lesions.

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