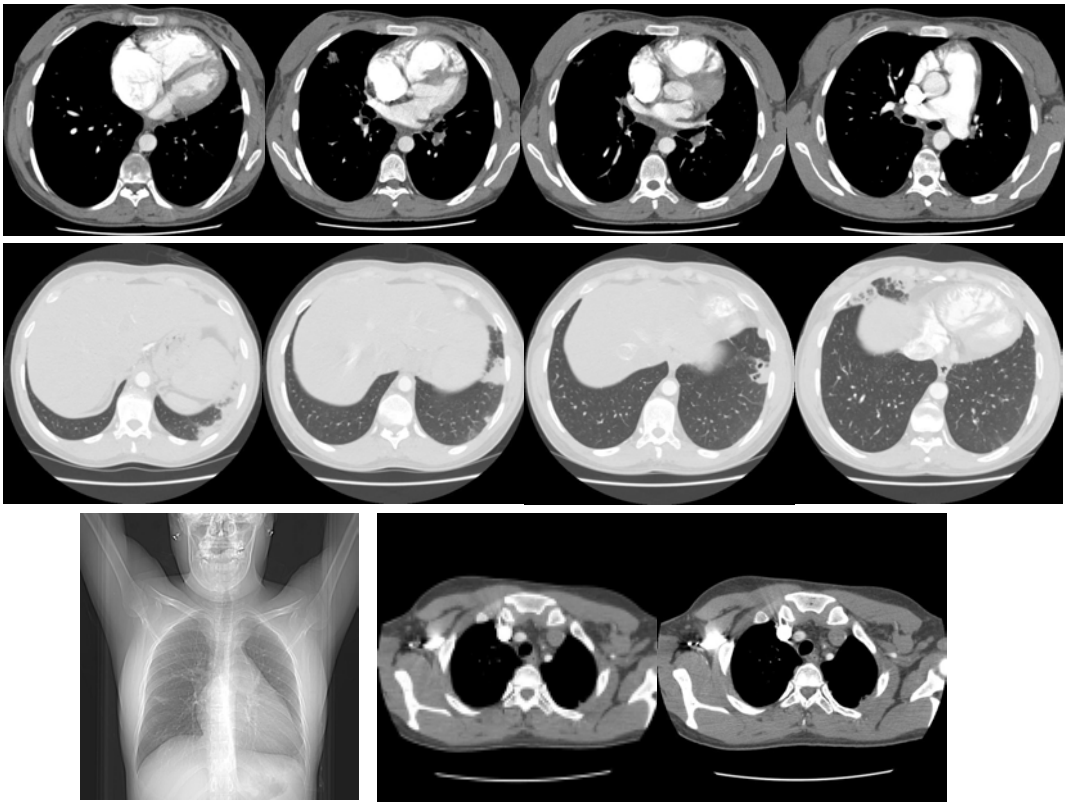
Radiological Diagnosis

Diagnosis of the case presented in the previous edition

J Bras Pneumol 2006;32(2):184

TAKAYASU ARTERITIS



42-year-old female patient, complaining of fatigue for a considerable length of time, accompanied by sporadic muscle and joint pain. Reports recent episodes of hemoptysis and chest pain accompanied by progressive dyspnea. Taking only hypertension medication and denies smoking or having a history of any relevant events

COMMENTS

In 1908, an ophthalmologist named Mikoto Takayasu reported the ocular manifestations of this disease. Subsequently, Drs. Onishi and Kagoshima reported similar alterations in other patients who also presented ocular manifestations, together with the lack of a palpable pulse in the upper limbs. In 1975, the disease was dubbed Takayasu arteritis.

Takayasu arteritis is a rare, chronic inflammatory disease of unknown origin, primarily affecting the aorta and its branches. It is principally seen in women in their 20s or 30s.

Symptoms can include general malaise, weakness, dizziness, fainting, fever, muscle pain, weight loss, circulatory deficiency, altered vision, angina, joint pain, hypertension and night sweats.

The principal finding on chest X-rays is increased wall thickness of the aorta and its branches (typically accompanied by luminal narrowing), which can also affect the pulmonary arteries.

In the case presented, the accentuated narrowing of the left common carotid artery was accompanied by fiber loss in the pulmonary arteries, and the parenchymal images were consistent with infarction.

This aspect is highly suggestive of arteritis. The principal differential diagnoses are other forms of arteritis that involve medium- to large-caliber vessels.

DANY JASINOWODOLINSKI, GUSTAVO DE SOUZA PORTES MEIRELLES, JAQUELINE OTA, NESTOR L MÜLLER
Fleury Center for Diagnostic Medicine, São Paulo, São Paulo, Brazil; Universidade Federal de São Paulo (UNIFESP, Federal University of São Paulo), São Paulo, São Paulo, Brazil, University of British Columbia, Vancouver, British Columbia, Canada

READERS CORRECTLY DIAGNOSING THE CASE PRESENTED IN THE MARCH/APRIL 2006 ISSUE

João Adriano de Barros - Universidade Federal do Paraná - Curitiba - PR

Shirley Coletty dos Santos - Departamento Médico da Câmara dos Deputados - Brasília - DF