

Acute type A aortic dissection in a patient with paraganglioma

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Abstract

Acute aortic dissection is the most common acute aortic syndrome. It is more prevalent in males and in the elderly, and has a high mortality. Hypertension is the main risk factor. Diagnosis is based on clinical features, laboratory tests and imaging exams. Treatment is usually surgical, although in some cases an endovascular approach is an alternative. Paraganglioma is an uncommon neuroendocrine tumor. Most produce catecholamines, and so usually manifest with hypertensive crisis, palpitations, headache and sweating. This tumor is diagnosed by measurement of plasma or urinary catecholamines and by computed tomography, magnetic resonance imaging and ¹²³I-metaiodobenzylguanidine (MIBG) scintigraphy. Surgery is the only potentially curative treatment.

Keywords:

Aortic dissection; Paraganglioma; Hypertension; Catecholamines; Surgery; Alpha and beta-blockers