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Spontaneous splenoazygos shunt in a patient with portal hypertension: an exceedingly rare occurrence

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CASE REPORT

We present the case of a spontaneous splenoazygos shunt in a 78-year-old male with known alcoholic liver cirrhosis. He was admitted with decompensated disease and a depressed level of consciousness and preemptive lactulose therapy was initiated. The magnetic resonance imaging (MRI) scan showed signs of portal hypertension with multiple extensive mediastinal and retroperitoneal varices. A splenoazygos shunt (Figs. 1-3) was seen with a markedly dilated and tortuous azygos vein (diameter of 12 mm). The patient was medically managed and later discharged.

DISCUSSION

Portal hypertension is a common complication of chronic liver diseases and is responsible for most clinical manifestations of cirrhosis. The imaging appearance of portosystemic collaterals can be quite variable (1,2). Increased portal venous resistance leads the high-pressure hepatopetal flow that is redirected through alternative pathways into the low-pressure systemic veins, usually draining through the splenic vein. Other tributaries of the portal vein are the left gastric, right gastric, paraumbilical and cystic veins. Splenoazygos shunt is an exceedingly rare collateral pathway that involves portal decompression from the splenic vein to the hemiazygos vein or posterior abdominal wall veins (1,3). Contrast-enhanced cross-sectional

computed tomography (CT) or MRI provides a detailed evaluation of collateral pathways between the portal and systemic veins that may influence the clinical management and therapy.

REFERENCES

1. Cho KC, Patel YD, Wachsberg RH, et al. Varices in portal hypertension: evaluation with CT. Radiographics 1995;15(3):609-22. DOI: 10.1148/radiographics.15.3.7624566

2. Gallego C, Velasco M, Marcuello P, et al. Congenital and acquired anomalies of the portal venous system. Radiographics 2002;22(1):141-59. DOI: 10.1148/radiographics.22.1.g02ja08141

3. Ito K, Higuchi M, Kada T, et al. CT of acquired abnormalities of the portal venous system. Radiographics 1997;17(4):897-917. DOI: 10.1148/radiographics.17.4.9225390

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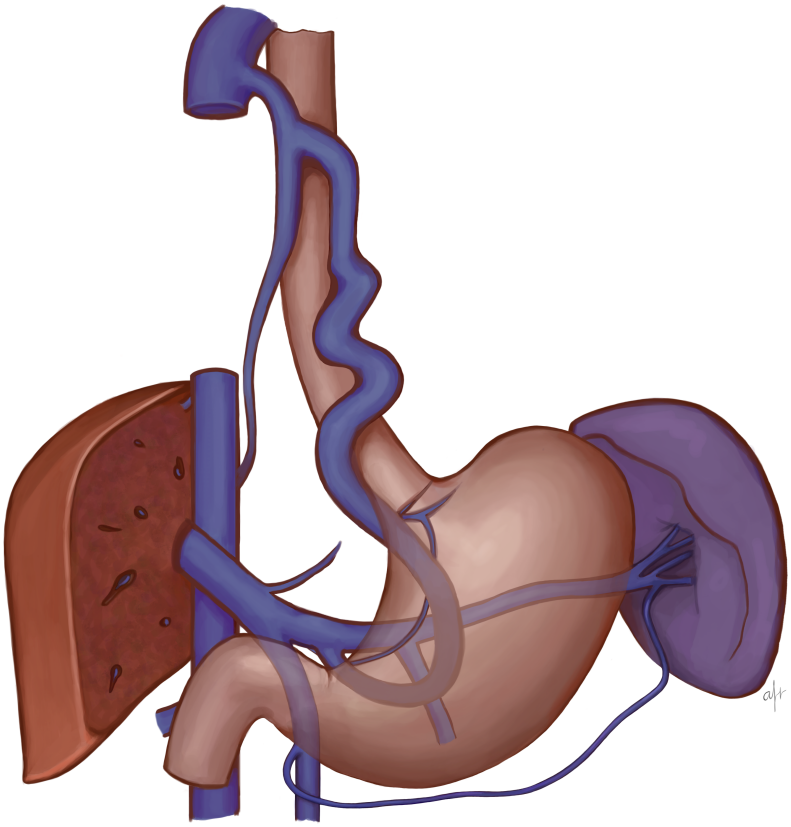

Fig. 1. Schematic illustration of a splenoazygos shunt.

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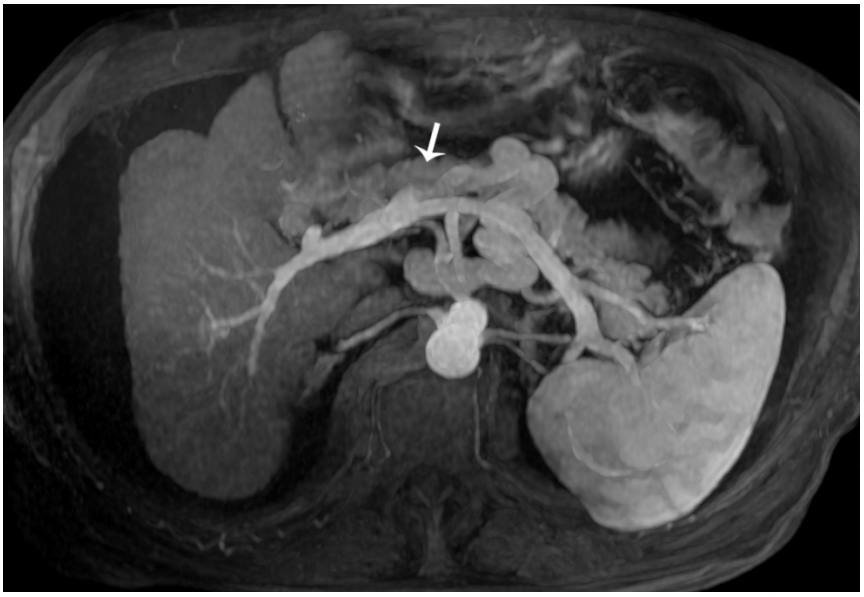

Fig. 2. MIP reconstruction of an axial fat-suppressed T1-w post-contrast image demonstrating a tortuous and dilated venous channel emerging from the inferior aspect of the splenic vein (arrow).

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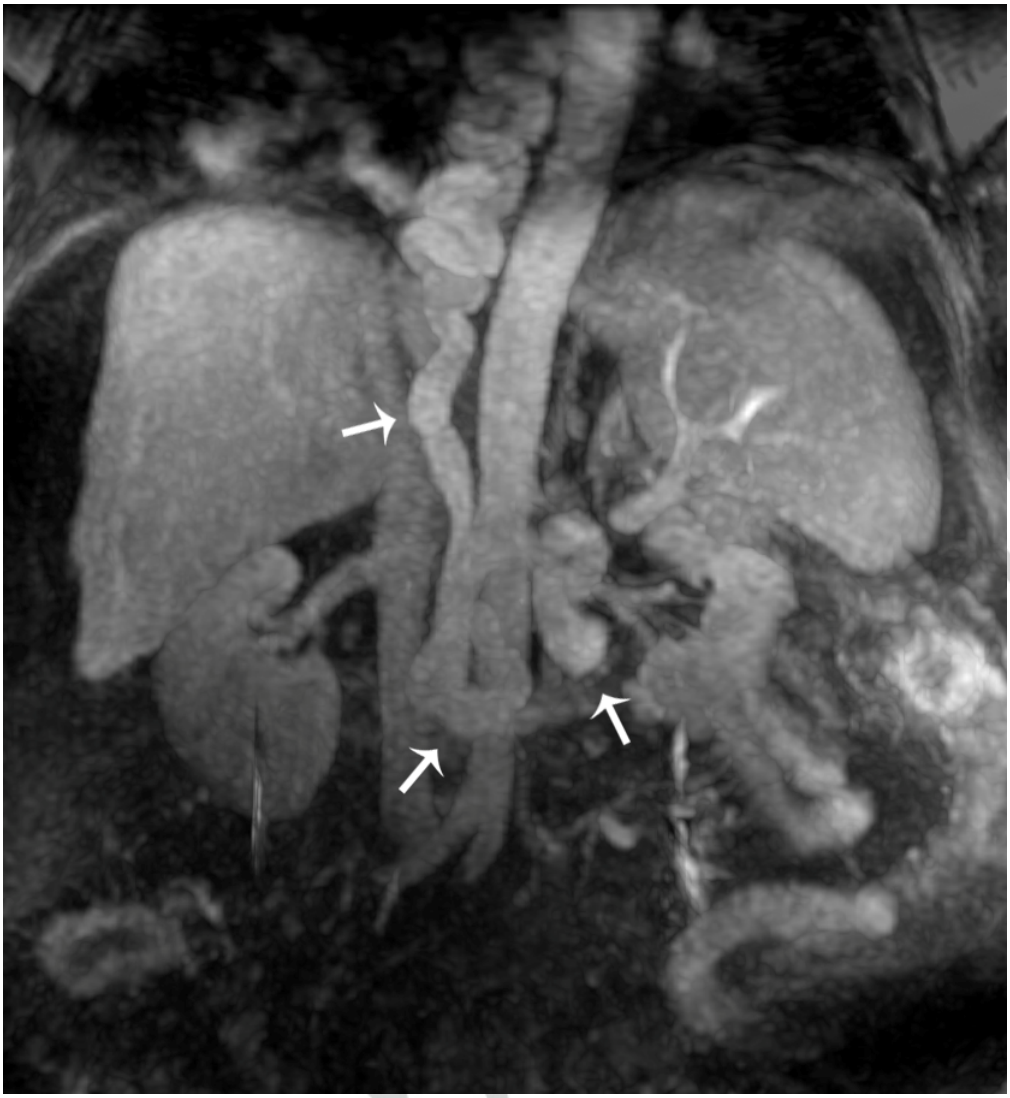

Fig. 3. MIP reconstruction of a coronal fat-suppressed T1-w post-contrast image showing the tubular venous channel (arrows) that arises from the splenic vein (not visualized) connecting to the azygos vein and ascending through the mediastinum.