

## 15. Occlusive diseases of the arteries. Aortic arch syndrome. Clinic, diagnosis, conservative and surgical treatment\*

1. A 62-year-old patient has been delivered to the surgical department with complaints of sudden pain in the umbilical region irradiating to the back and groin, which was accompanied by a syncope. Objectively: the patient is in grave condition, umbilical region is tender on palpation, bowel sounds are diminished. AP drop is present. USI reveals: free fluid in the abdomen, thickening of the wall of the abdominal aorta. The most likely diagnosis is:

**A. Rupture of abdominal aortic aneurism**

- B. Acute pancreatitis
- C. Stomach ulcer perforation
- D. Peritonitis
- E. Acute appendicitis

2. In a 65 y.o. female patient a tumor 13x8 cm in size in the umbilical area and above is palpated, mild tenderness on palpation, unmovable, pulsates. On auscultation: systolic murmur. What is the most probable diagnosis?

**A. Abdominal aortic aneurism**

- B. Arterio-venous aneurism
- C. Stomach tumor
- D. Tricuspid valve insufficiency
- E. Mitral insufficiency

3. A 48-year-old male patient complains of pain in the lower extremities, especially when walking, intermittent claudication, numbness in the fingers, cold extremities, inability to walk more than 100 meters. Sleeps with his leg lowered. The patient has been a smoker since he was 16, abuses alcohol, has a history of CHD. The left lower extremity is colder than the right one, the skin of extremities is dry, pedal pulse cannot be palpated, femoral pulse is preserved. What is the most likely diagnosis?

**A. Obliterating endarteritis**

- B. Raynauds disease
- C. Deep thrombophlebitis
- D. Diabetic angiopathy
- E. Leriche syndrome

4. A 98 y.o. male patient complains of pain in the left lower limb which intensifies on walking, feeling of cold and numbness in both feet. He has been ill for 6 years. On examination: pale dry skin, hyperkeratosis. Hairy covering is poorly developed on the left shin. "Furrow symptom " is positive on the left. Pulse on foot arteries and popliteal artery isnt palpated, on the femoral artery its weak. On the right limb the artery pulsation is reserved. What is the most probable diagnosis?

**A. Arteriosclerosis obliterans**

- B. Obliterating endarteritis
- C. Raynauds disease

- D. Buerger's disease (thromboangiitis obliterans)
- E. Femoral artery thrombosis

5. A 15 year old patient suffers from headache, nasal haemorrhages, sense of lower extremity coldness. Objectively: muscles of shoulder girdle are developed, lower extremities are hypotrophied. Pulsation on the pedal and femoral arteries is sharply dampened. BP is 150/90 mm Hg, 90/60 on the legs. Systolic murmur can be auscultated above carotid arteries. What is the most probable diagnosis?

**A. Aorta coarctation**

- B. Aorta aneurism
- C. Aortal insufficiency
- D. Coarctation of pulmonary artery
- E. Aortal stenosis

6. A 52 year old patient complains about headache, weakness of his upper left extremity. Neurological symptoms become more intense during physical stress of the left extremity. Pulsation on the arteries of the left extremity is sharply dampened but it remains unchanged on the carotid arteries. What is the most probable diagnosis?

**A. Occlusion of the left subclavicular artery, steal syndrome**

- B. Raynauds syndrome
- C. Occlusion of brachiocephalic trunk
- D. Takayasu's disease
- E. Thoracic outlet syndrome