

Clinical Image

Coronary to Bronchial Artery Fistula

DONG-KIE KIM,¹ SANG-HOON SEOL¹

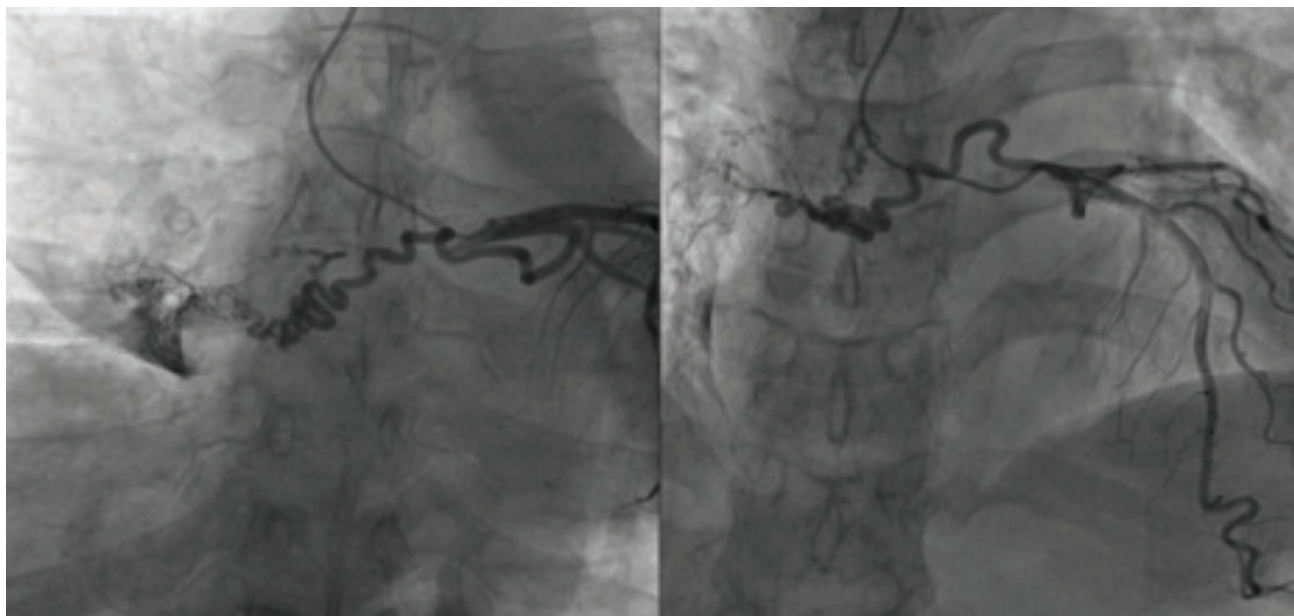


Fig.-1: *Coronary angiography.*

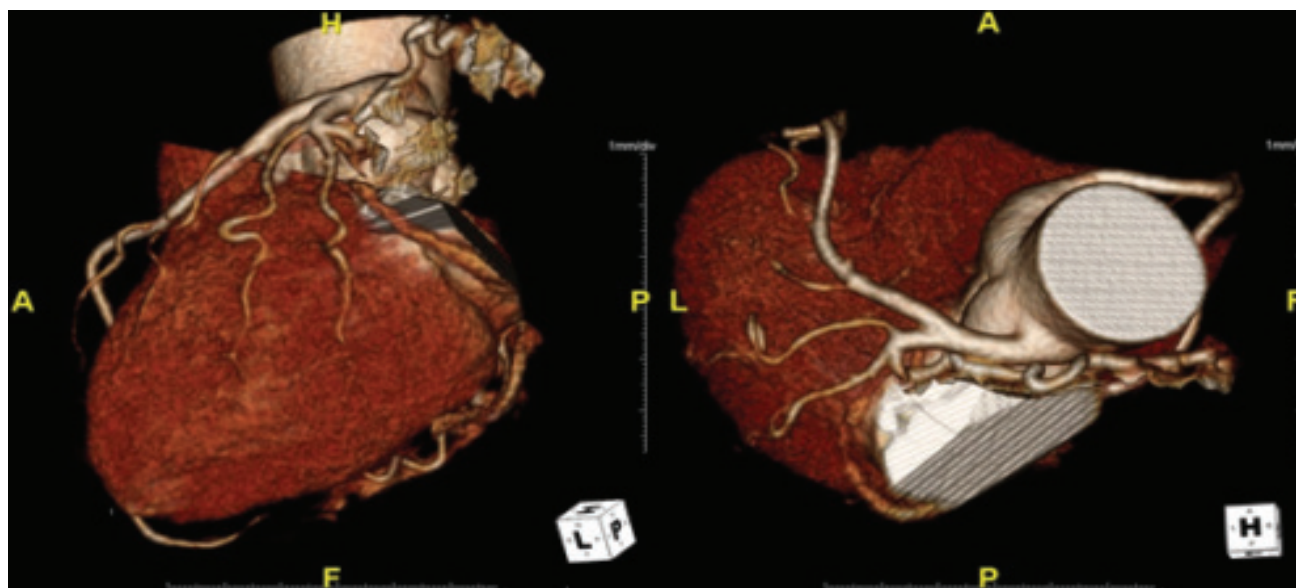


Fig.-2: *Coronary CT angiography.*

1. Division of Cardiology, Department of Internal Medicine, Inje University College of Medicine, Haeundae Paik Hospital, South Korea.

Corresponding author: Sang-HoonSeol. MD. Department of Medicine, Inje University College of Medicine, Haundae Paik Hospital, 1435 Jwa-dong, Haeundae-gu, Busan, 612-030, Korea. Fax : (82-51)-797-3009, Tel : (82-51)-797-3070, E-mail: hacemed@hanmail.net.

A 60-year-old woman was referred to our hospital for evaluation of chest pain. She was diagnosed of bronchiectasis 2 years ago. On physical examination, electrocardiogram and chest X-ray revealed normal. Echocardiography showed normal left ventricular function. Coronary angiography showed a coronary-bronchial artery fistula originating from the proximal portion of the left circumflex artery (LCX) (Figure 1). Coronary CT angiography revealed tortuous bronchial artery communicated with LCX (Figure 2). Chest CT angiography demonstrated communication from the systemic arteries (LCX, inferior phrenic artery) to bronchial artery. She underwent exercise stress test. There was no ischemic sign. The patient was discharged with medication and followed regularly. Systemic bronchial artery fistula may be silent, or present with chest pain or hemoptysis.¹ It is

usually related with bronchiectasis. Various imaging modalities should be considered to identify multiple fistulas, or the course and termination site of the fistula.²

Key words: Coronary artery, Bronchial artery, Fistula, Coronary angiography.

References:

1. Said SAM, Oortman RM, Hofstra JH, et al. Coronary artery-bronchial artery fistulas: report of two Dutch cases with a review of the literature. *Netherlands Heart Journal* 2014;22:139-47.
2. Schmid M, Achenbach S, Ludwig J, et al. Visualization of coronary artery anomalies by contrast-enhanced multi-detector row spiral computed tomography. *International Journal of Cardiology* 2006;111:430-5.