

38 year-old male referred for
further evaluation of
indeterminate right flank mass.

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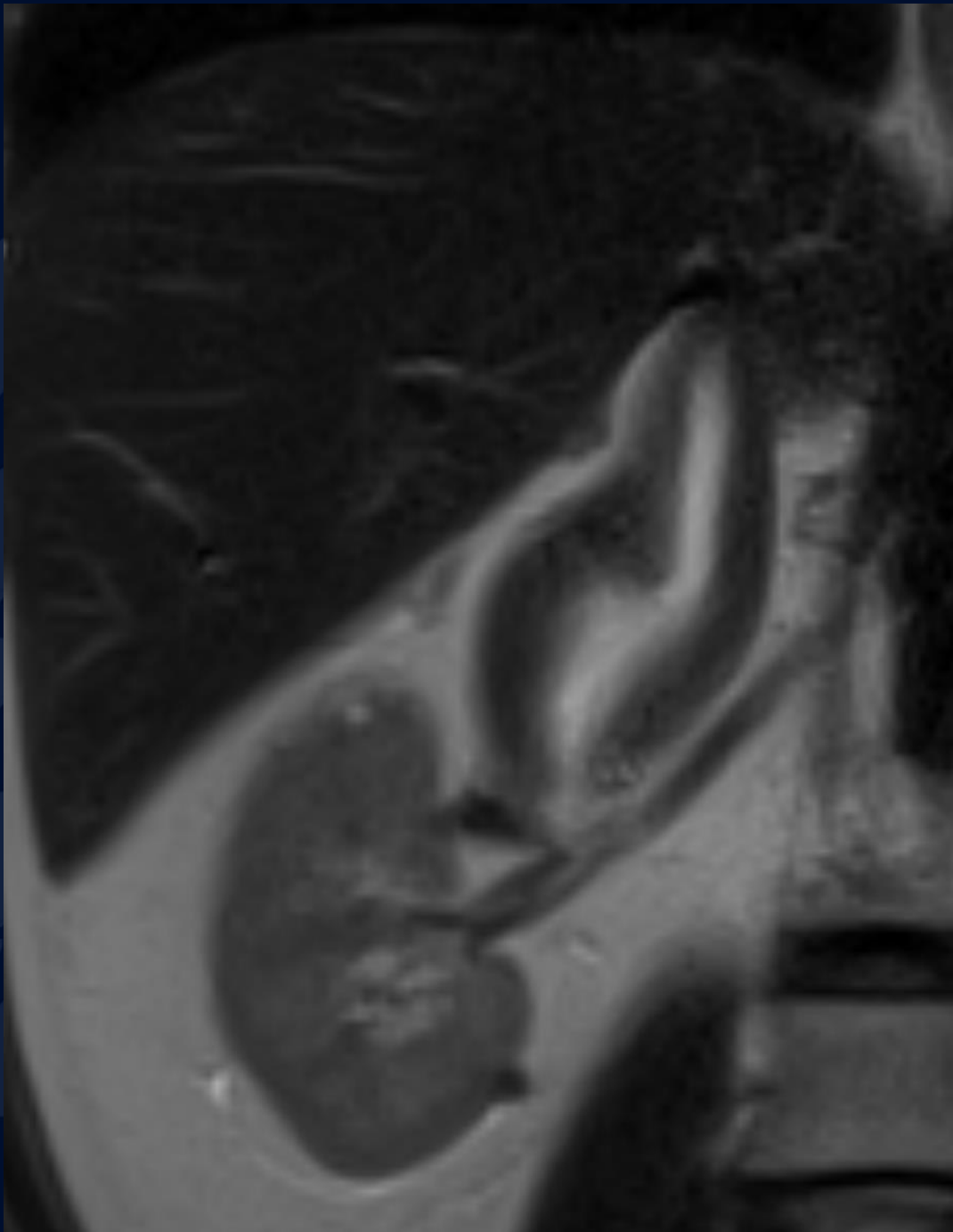
UCONN
HEALTH

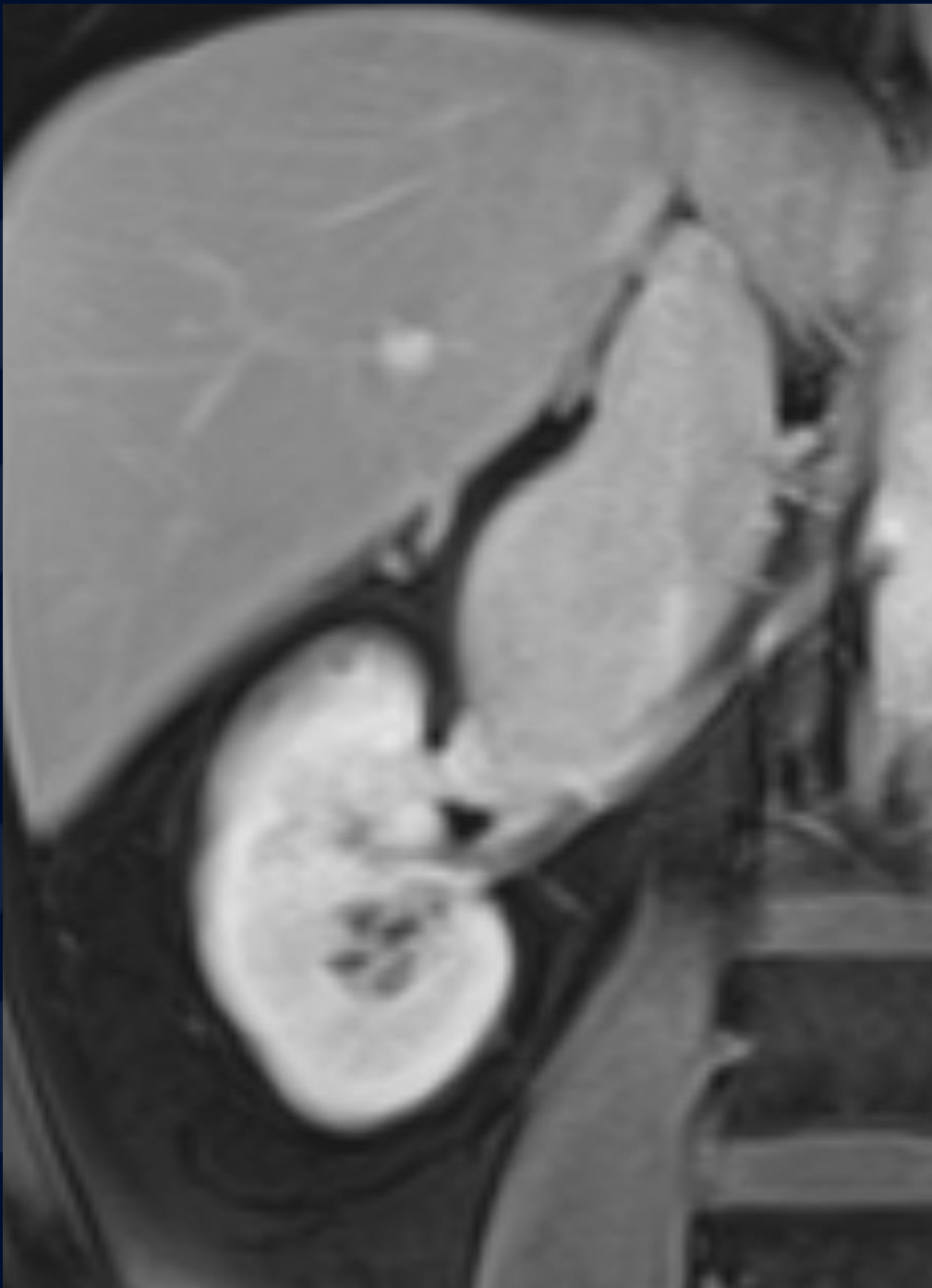
RADIOLOGY











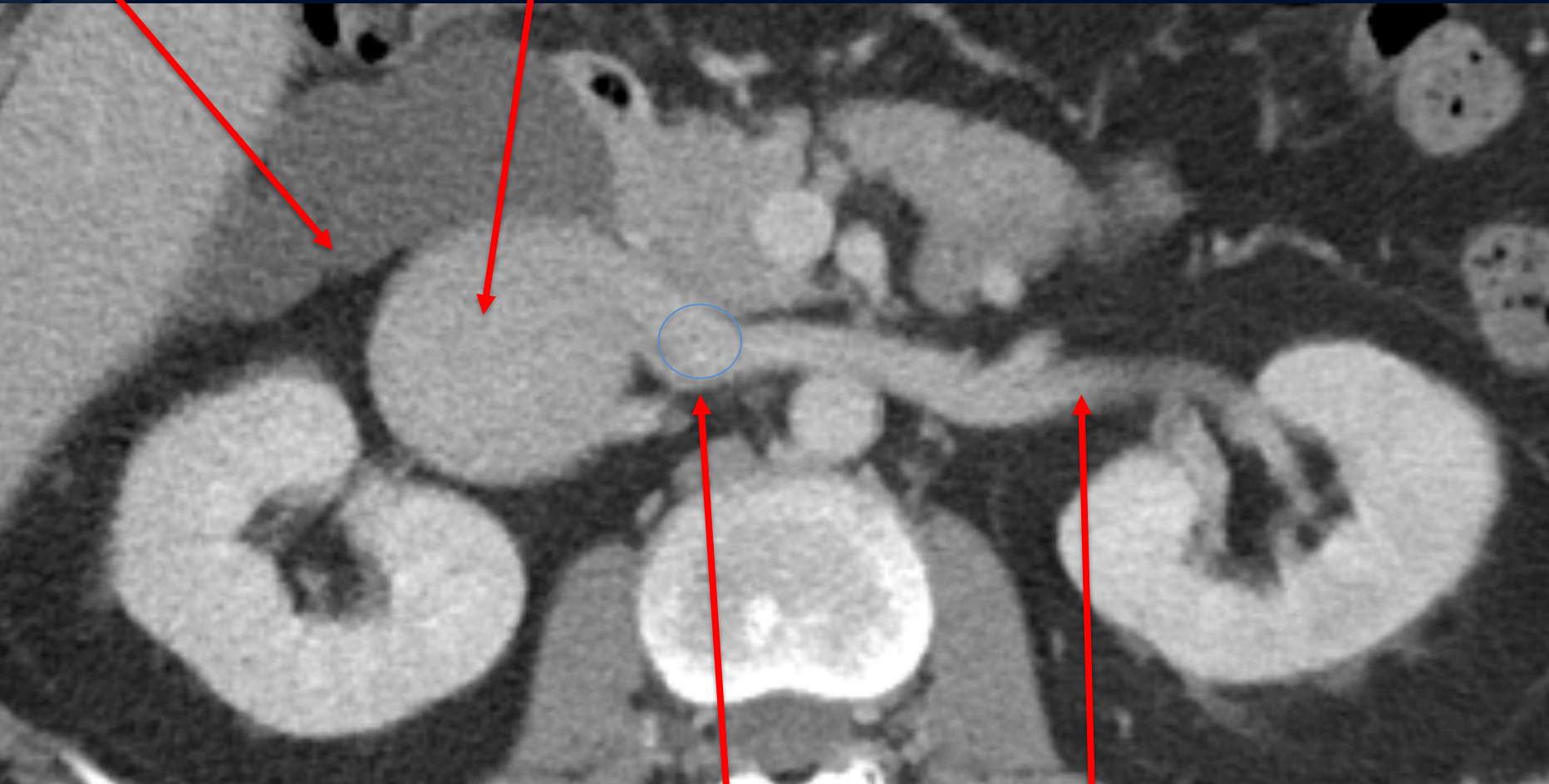
A large, stylized oak leaf graphic in a dark blue color, positioned on the left side of the slide. The leaf has a prominent central vein and several smaller veins branching off, with a scalloped edge.

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Right renal vein aneurysm

Incidental
Lymphangioma

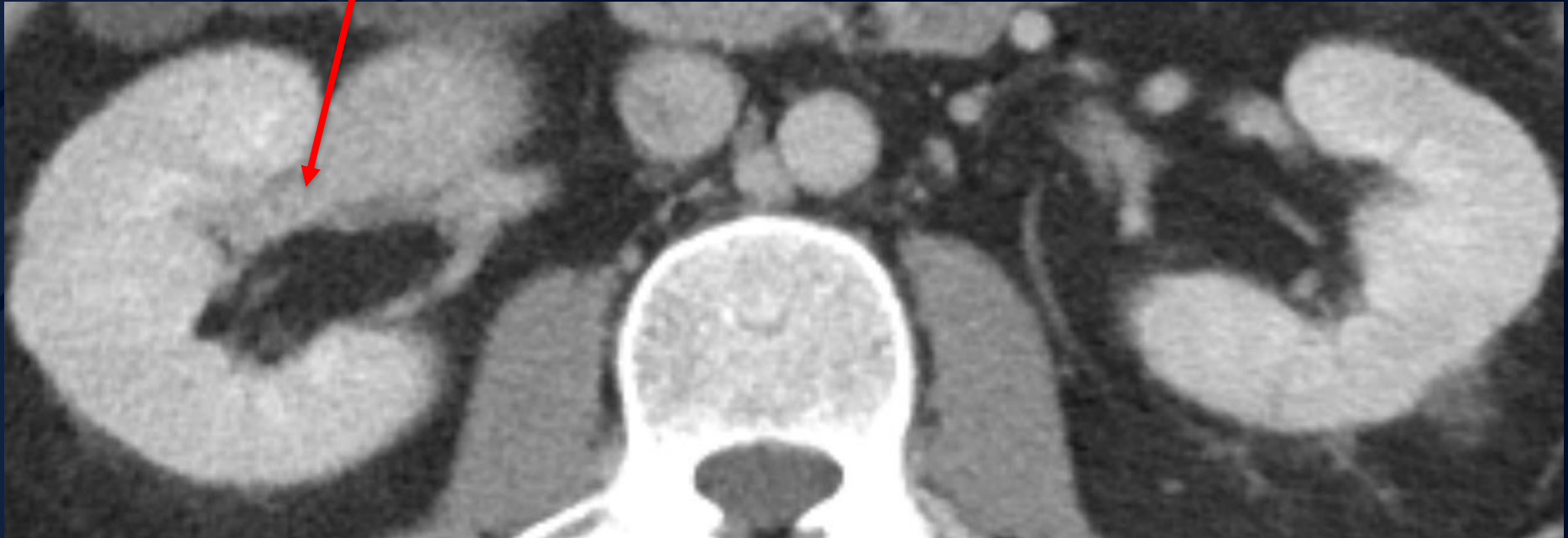
Right renal vein aneurysm

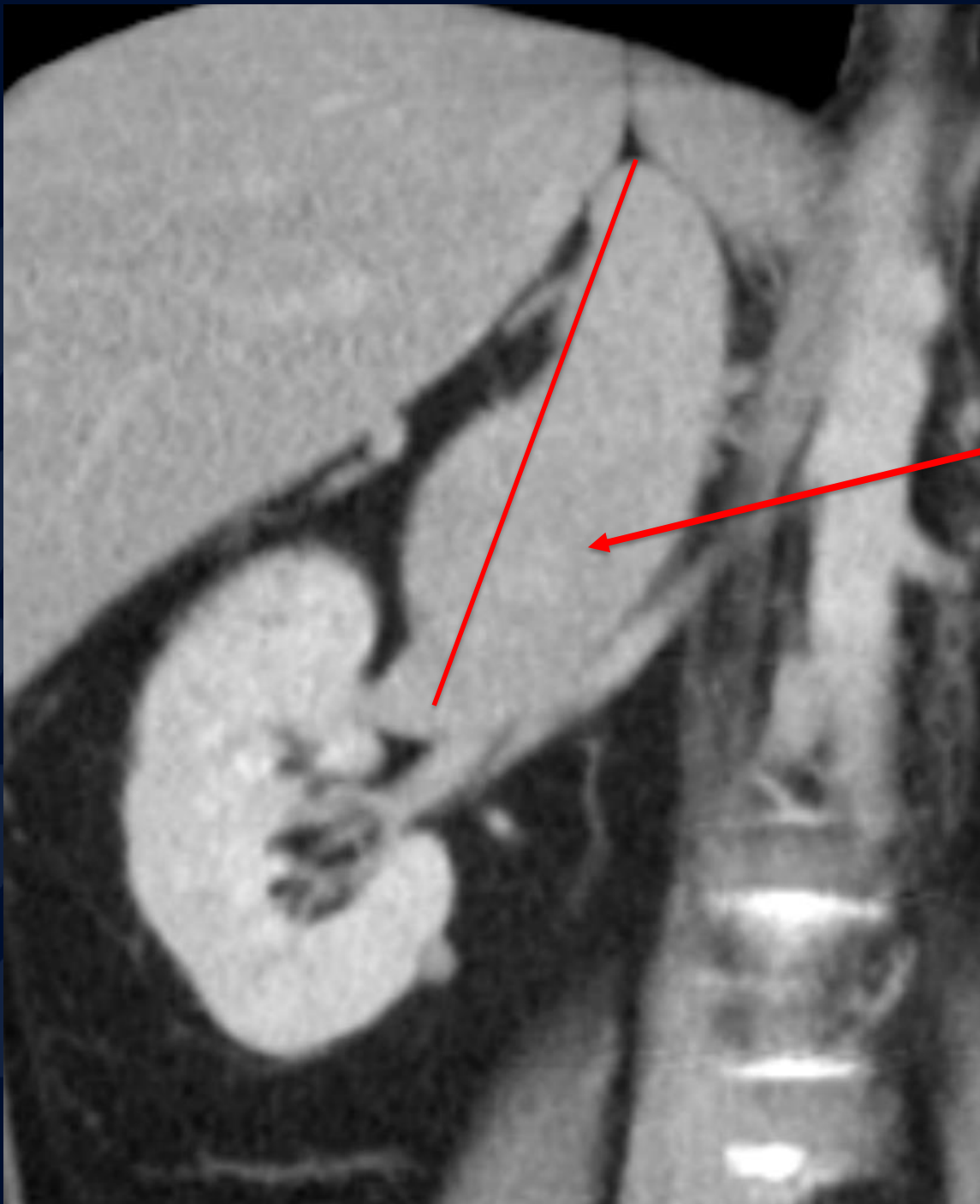


Inferior vena cava

Left renal vein

Base of right renal vein aneurysm entering right renal hilum

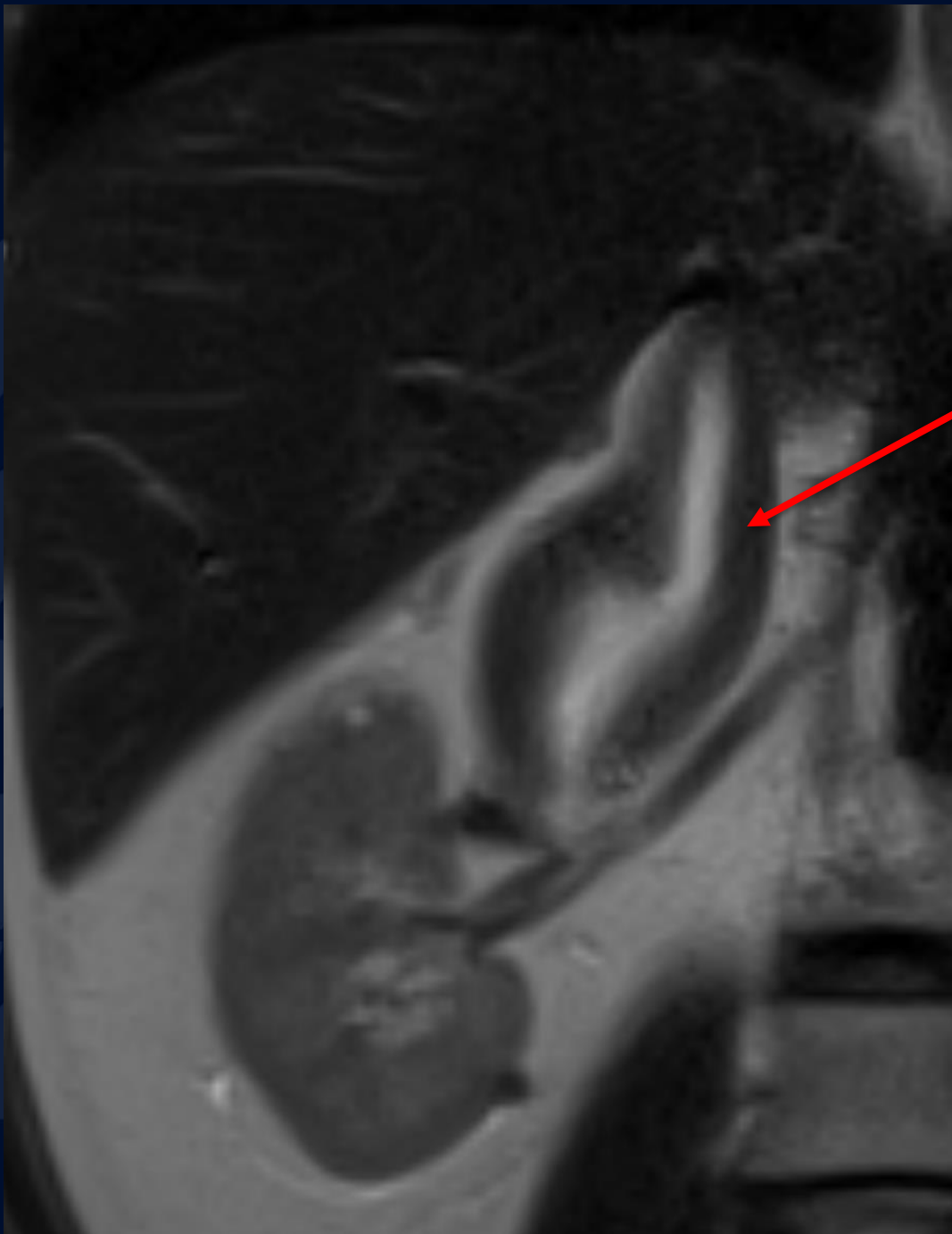




Large
saccular
aneurysm
arising from
right renal
vein, 10.2 cm
in max
dimension

“Swirling” flow-related signal on MRI suggests vascular lesion, not a solid mass





Flow-related signal on MRI suggests vascular lesion, not a solid mass



T1 C+ image demonstrating right renal vein aneurysm seen arising from right renal hilum with venous phase-enhancement

Venous Aneurysms

- Venous aneurysms are rare and are typically asymptomatic found incidentally on imaging studies
 - Most commonly CT, but can also be seen on ultrasound or MRI
- Can occur at any age and occur equally in both genders
- No clear etiology for venous aneurysms at this time but literature suggests both congenital and acquired sources
- The most common location for venous aneurysms are the popliteal vein
 - Others have been reported in the superior and inferior vena cava, jugular, saphenous, and intracranial veins.
 - Very few visceral venous aneurysms including portal vein and renal vein aneurysms are reported in the primary literature

Venous Aneurysms

Management:

- Dependent on location of venous aneurysm
- Aneurysms located in the lower extremity venous system have been associated with increased risk of DVT and PE
 - May necessitate surgical or anticoagulation treatment
- Observation with annual measurement on imaging has been reported for asymptomatic venous aneurysms, especially those of the internal jugular vein

Venous Aneurysms

Management (cont):

- Management of visceral venous aneurysms including those of renal vein origin is dependent on pain at presentation and compression of surrounding structures
- The majority of reported cases of visceral vein aneurysm followed by observation showed little to no change in aneurysm size on follow up imaging studies

Venous Aneurysms

Complications:

- Rupture
- Thrombosis
- Compression of surrounding structures

References

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