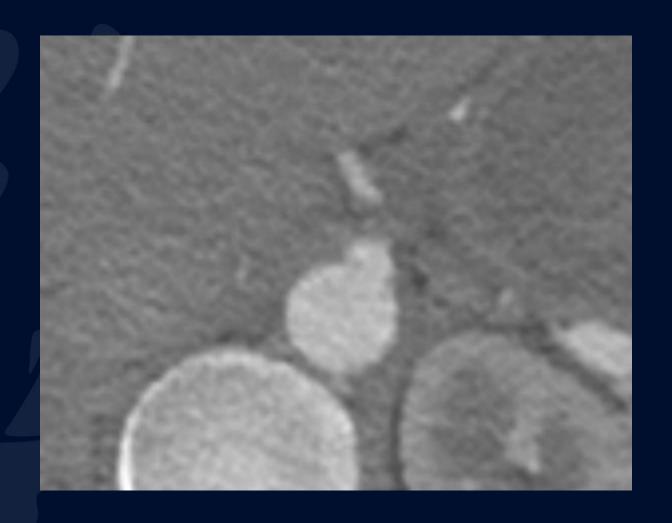
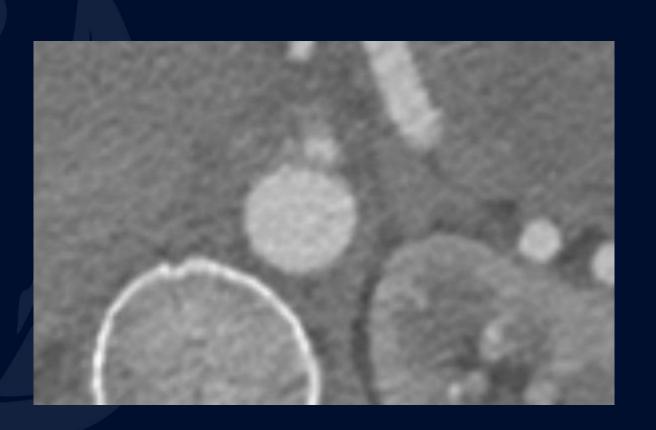
53F with chronic epigastric pain

Victoria Greenwood, MS4 Ryan Joyce, MD Charan K singh, MBBS.

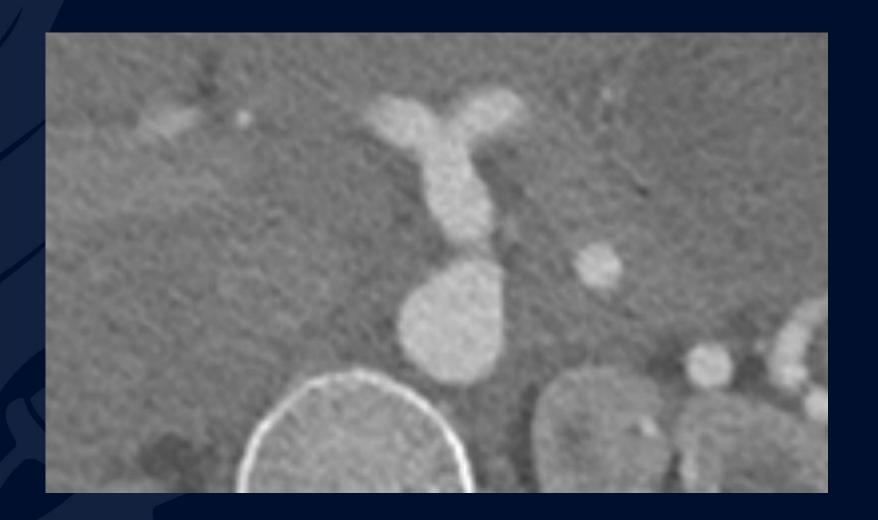




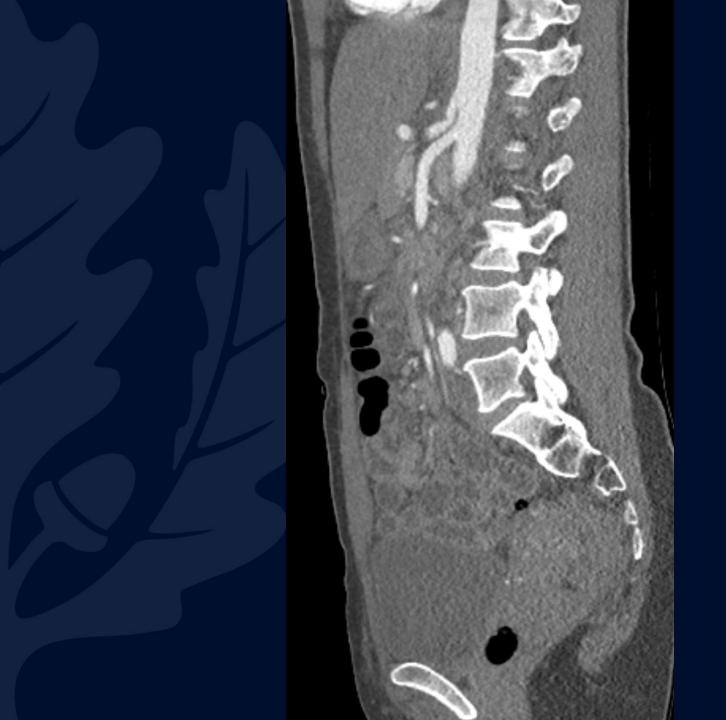




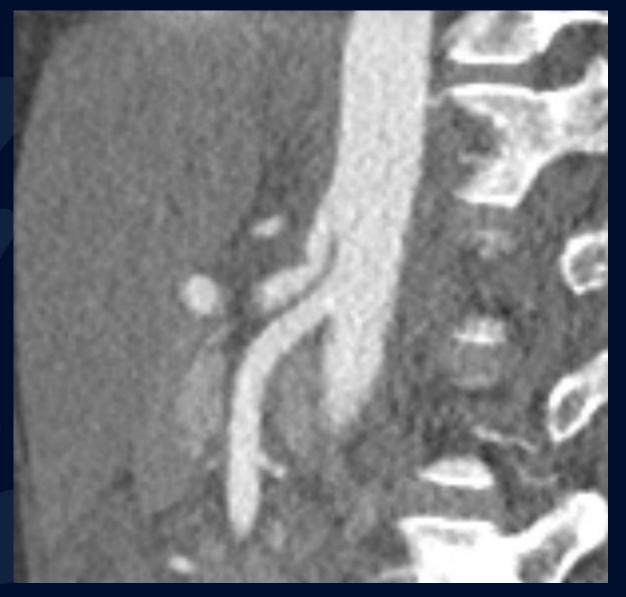




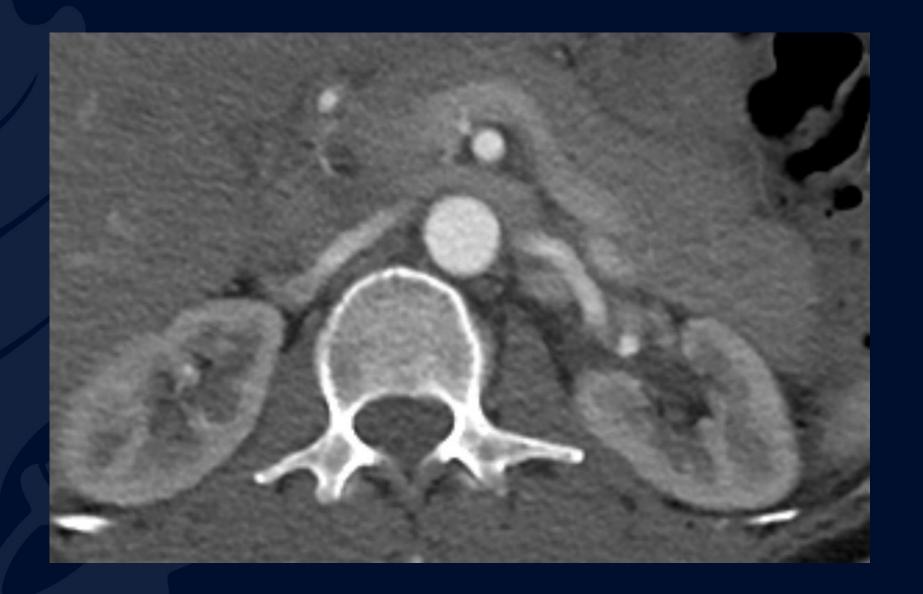


















Celiac artery compression syndrome





Patent celiac artery origin



Mild dilatation of celiac artery distal to kink





Notched or kinked appearance of proximal celiac artery secondary to compression by the median arcuate ligament













Celiac artery compression syndrome (aka median arcuate ligament syndrome)

- Diagnosis best made on CTA or MRA images
- Median arcuate ligament: fibrous arch which at the crura of diaphragm which overlays aorta
- Celiac artery compression accentuated during expiratory phase of respiration; expiration useful during imaging for detection
- Compression of celiac artery may occur at the proximal celiac artery, demonstrating a notched or kinked appearance from external compression rather than internal stenosis

RADIOLOGY

Celiac artery compression syndrome

- A.K.A. celiac axis syndrome, median arcuate ligament syndrome, and Dunbar syndrome
- Diagnosis of exclusion for chronic epigastric or abdominal pain
- Symptom triad: postprandial abdominal pain, weight loss, +/- abdominal bruit
- Epidemiology: F>>M, 4th-6th decades of life, low BMI
- Definitive Dx made with CTA/MRI + US
- Treatment: surgery in highly select patients



References

- 1. Gloviczki P, Duncan AA. Treatment of celiac artery compression syndrome: does it really exist? Perspect Vasc Surg Endovasc Ther 2007; 19:259.
- 2. Kim EN, Lamb K, Relles D, et al. Median Arcuate Ligament Syndrome-Review of This Rare Disease. JAMA Surg 2016; 151:471.
- 3. Weber JM, Boules M, Fong K, et al. Median Arcuate Ligament Syndrome Is Not a Vascular Disease. Ann Vasc Surg 2016; 30:22.

