

Replaced middle colic artery originating from the coeliac trunk

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A 12-year-old girl with a medical history of neonatal repair of a lumbosacral meningocele presented with intermittent lower gastrointestinal haemorrhage. Diagnostic work-up included catheter visceral angiography. Contrast medium injection did not reveal any source of bleeding; however variant vascular anatomy was depicted. Figure 1 shows coeliac angiography with the middle colic artery (*small arrows*) supplying the transverse colon originated from the coeliac trunk instead of from the superior or inferior mesenteric artery. Overflow of contrast medium into the superior mesenteric artery (*arrowheads*) and left colic artery (*large arrows*) is also shown.

This uncommon aberrant anatomy, without further clinical consequences, is only described in cadaver studies at a rate of 0.5–1% of cases [1, 2]. However, in cases of negative superior and inferior mesenteric angiography, cannulation of the coeliac trunk may be required to opacify a replaced middle colic artery and a potential bleeding point in the transverse colon.

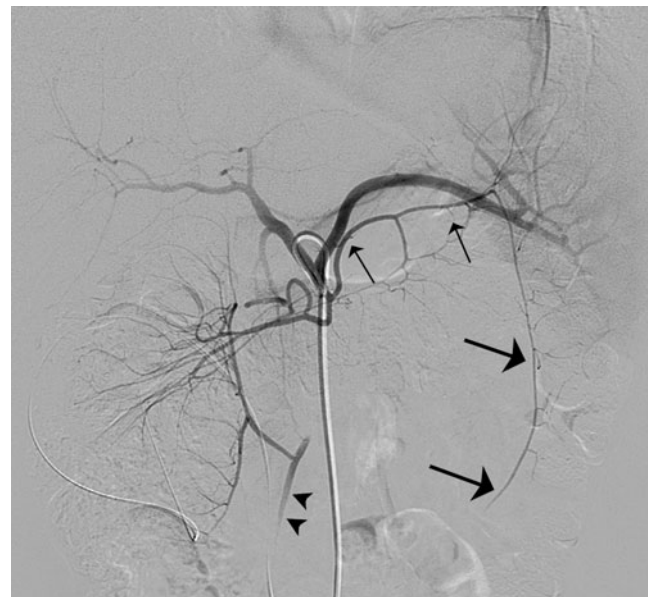


Fig. 1 Coeliac trunk angiography

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References

1. Nelson TM, Pollak R, Jonasson O et al (1998) Anatomic variants of the celiac, superior mesenteric, and inferior mesenteric arteries and their clinical relevance. *Clin Anat* 1:75–91
2. Yıldırım M, Celik HH, Yıldız Z et al (2004) The middle colic artery originating from the coeliac trunk. *Folia Morphol (Warsz)* 63:363–365