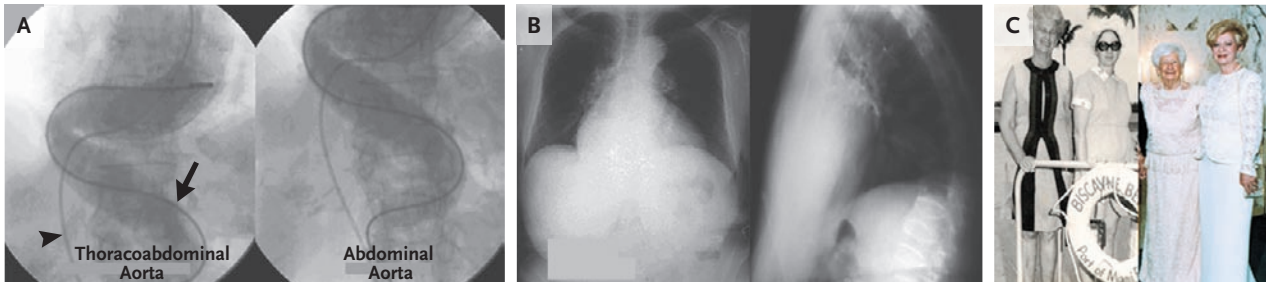


IMAGES IN CLINICAL MEDICINE

The Aorta in Osteoporosis



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AN 86-YEAR-OLD WOMAN WITH SEVERE SYMPTOMATIC AORTIC STENOSIS was referred for routine preoperative cardiac catheterization. During the procedure, pronounced tortuosity of the catheter was noted. Subsequent administration of intravenous contrast material revealed the presence of a markedly tortuous thoracic and abdominal aorta with no evidence of a localized aneurysm (Panel A) and with a clearly visible Judkins catheter (arrow) and venous catheter (arrowhead). The peripheral circulation was normal in both upper and lower limbs at physical examination, and the kidney function was not compromised. Chest radiography showed multiple vertebral compression fractures and pronounced kyphosis (Panel B). Two photographs of the patient and her daughter taken 35 years earlier and a few weeks before the catheterization (Panel C) suggest that the progressive development of compression fractures and the consequent reduction in the patient's height were responsible for the unusual morphologic features of the aorta. The patient had not received any treatment for osteoporosis. She underwent successful aortic-valve replacement with a tissue prosthesis.

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