

EP-057

안면 외상 후 발생한 천측두동맥
가성동맥류의 현미경하 절제
: 증례 보고

(Excision of Traumatic Pseudoaneurysm of the Superficial Temporal Artery Under Microscopic Guidance: A Case Report)



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Purpose: Traumatic pseudoaneurysms of the facial region are rare vascular lesions following blunt or penetrating facial trauma. The superficial temporal artery (STA), due to its superficial course, is one of the major arteries susceptible to facial pseudoaneurysm formation. We report a case of traumatic pseudoaneurysm of the STA frontal branch, managed with microscope-assisted en bloc excision.

Methods: A 74-year-old male developed a pulsatile mass on the left forehead with intermittent pain during follow-up after fall-related facial trauma. Craniofacial computed tomography revealed an aneurysmal dilatation in the cutaneous layer suggestive of a traumatic pseudoaneurysm of the frontal branch of the superficial temporal artery. Feeding vessels were identified and ligated under microscopic guidance, and the pseudoaneurysm was excised en bloc.

Results: Histopathological examination confirmed a vascular wall with myxoid degeneration and dystrophic calcification, consistent with pseudoaneurysm. The patient was discharged on the day of surgery without complications, with no recurrence at follow-up.

Conclusion: Traumatic pseudoaneurysm of the STA should be considered in the differential diagnosis of pulsatile masses after facial trauma. Microscope-assisted excision enables precise feeding vessel identification and complete en bloc removal with favorable outcomes.



Fig. 1. Preoperative photographs of a 74-year-old male showing a pulsatile mass on the left forehead (red circle). (A) Frontal view. (B) Left oblique view demonstrating the mass along the expected course of the frontal branch of the superficial temporal artery. (C) Left lateral view.

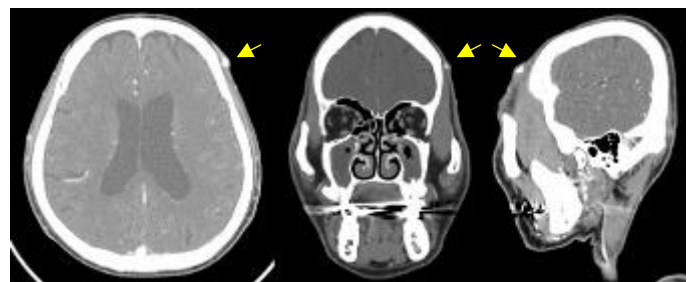


Fig. 2. Craniofacial computed tomography (CFCT) performed on December 12, 2025. Axial, coronal, and sagittal views showing an approximately 4-mm aneurysmal dilatation in the left forehead cutaneous layer (arrow), suggestive of traumatic pseudoaneurysm.



Fig. 3. Intraoperative photographs under operating microscope. After linear incision and subcutaneous dissection, the pseudoaneurysm is identified with its feeding vessels.



Fig. 4. Excised pseudoaneurysm specimen measuring 0.6 x 0.5 cm and histopathological examination (H&E staining) showing vascular wall with myxoid degeneration and dystrophic calcification, consistent with chronic degenerative changes of a pseudoaneurysm.