Retropharyngeal Course of Right Internal Carotid Artery

ABSTRACT
A case of retropharyngeal course of right internal carotid artery diagnosed on CT angiography is presented along with its clinical relevance.

Keywords: Retropharyngeal course, Right internal carotid artery, CT angiography.


INTRODUCTION
A 56-year-old woman, a follow-up case of Takayasu’s arteritis, underwent CT angiography for evaluation of stents in B/L subclavian arteries and carotids. Incidentally finding of medial deviation of right ICA in retropharyngeal soft tissue of neck was noted, causing a bulge in the posterior pharyngeal wall (Figs 1A to C).

Anatomic variation of ICA may vary from mild kinking to complete circular loop formation.\(^1,2\) This variation is found in 0.2% of population\(^3\) and may be asymptomatic or may present as bulging mass with smooth surface. This pulsating bulging mass may be confused with retropharyngeal enlarged lymph node, edema, neoplasm or abscess.\(^4\) Unknowingly, any attempted needle aspiration or drainage of this mass may lead to catastrophic consequences. This variation may also lead to a high-risk of complications if it is not recognized especially before any pharyngeal surgical procedure like tonsillectomy or drainage of peritonsillar abscess which may result in massive hemorrhage.\(^5\) Contrast enhanced multislice CT is the modality of choice as it simultaneously offers CT angiography and clear multiplanar images which allow thorough visualization of this vascular anomaly and its anatomical relationship, which is particularly important for preoperative planning for any pharyngeal surgical procedure.

REFERENCES