ANOMALOUS BRANCH OF THE RIGHT COMMON CAROTID ARTERY

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The right common carotid artery (CCA) originates from the brachiocephalic trunk. It follows ascending passage for the lateral region of the neck, deep to the sternocleidomastoid, sternohyoid, and sternothyroid muscles. The right CCA follows until near the upper border to the thyroid cartilage in the transverse process of the 4th thoracic vertebra, where it divides into an internal and an external carotid artery. The common carotid does not emit ramification and keeps its constant bore, approximately 8 mm, since the origin until the bifurcation, where it is dilated and divided¹. The inferior thyroid artery (ITA) arises from the subclavian artery (troncotireocervical), divides in a medial branch and a lateral that anastomoses with the superior thyroid artery²⁻³. This branch supplies the isthmus and inferior pole of the thyroid gland⁴.

We report a case of a patient with ITA as an anomalous branch of common carotid artery.

CASE
A 44-year-old woman, with left cerebellar ischemic stroke, preceded by ipsilateral cervical pain. Magnetic resonance imaging (MRI) showed ischemic lesion and vertebral dissection was suspected. Digital subtraction angiography did not confirm change in the right vertebral artery, but it has revealed an anomalous branch of the CCA compatible with the inferior thyroid artery (Figure). The patient had a good recovery and is currently asymptomatic.

DISCUSSION
Though rare, anomalous branches arising from the common carotid artery have been described, including the superior and inferior thyroid arteries, lingual, ascending pharyngeal, bronchial, facial artery and others. The literature reports anomalies of the common carotid artery but without their anatomical characteristics⁵.

Lemaire et al.⁶ reported a case of anomalous origin of the superior thyroid and lingual arteries originating from the common carotid artery through a common core. Kaneko et al.⁷ presented a case of superior thyroid, lingual and facial arteries arising from the common carotid as well as a common trunk that originates the auricular, maxillary, and superficial temporal arteries.

Matsumoto et al.⁸ report a case of the common carotid artery dividing in a more elevated position than the...
usual, forming anomalous branches as the lingual artery to the level of the inferior edge of the third cervical vertebra, superior thyroid in the region of the 4th cervical vertebra, and facial, originating a distance of 3 mm from the origin of the lingual artery.

In conclusion, we have reported a patient with anomalous branch of common carotid artery. This finding, detected by cerebral angiography, is rare and incidental.

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REFERENCES