

not palpable. Ankle brachial systolic index was 0.7. Digital subtraction angiography of the right lower limb shows short segment chronic total occlusion of the distal superficial femoral artery. However there were reconstitution of the popliteal artery, anterior tibial artery and posterior tibial artery. Ultrasonography of the right leg shows the medial head of gastrocnemius impinge over the right popliteal artery. Intraoperative findings revealed Type II Popliteal Artery Entrapment Syndrome. Right myomectomy and popliteal bypass with interposition of vein graft was done. At follow-up, he has a complete resolution of his symptoms.

## CONCLUSION

Popliteal Artery Entrapment Syndrome should be considered when dealing with young patients with claudication.

## PP 61 HEART FAILURE AS A PRESENTATION OF ABDOMINAL AORTIC ANEURYSM CAUSED BY THE PRESENCE OF AORTOCAVAL FISTULA

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## INTRODUCTION

Aortocaval fistula is an uncommon complication of ruptured abdominal aorta aneurysm (AAA). It accounts for 3-6% of all ruptured cases. The AAA usually ruptures to the retroperitoneum space or peritoneal cavity; rarely do they rupture into the IVC forming an aortocaval fistula.

## CASE REPORT

We report a case of aortocaval fistula that was found during an elective abdominal aortic aneurysm repair. A 60 years old gentleman presented with lethargy and worsening shortness of breath for 3 days duration. No history of abdominal pain or back pain. Clinically he was hypotensive and there was a pulsatile central abdominal mass. Computed tomography of the abdomen shows 8.7 x10 x 12 cm infrarenal abdominal aortic aneurysm that extend to the bifurcation of aorta. There was an aortocaval fistula noted. There was no evidence of leak or dissection. Open Abdominal Aortic Aneurysm repair was done. The fistula was closed within the sac with a monofilament polypropylene sutures. Post operatively patient developed hospital acquired pneumonia and prolonged ileus. He was discharged well on post operative day 10.

## CONCLUSION

Aortocaval fistula is an uncommon complication of AAA. However the diagnosis should be considered as it may lead to massive bleeding intraoperatively.

## PP 62 CONGENITAL ARTERIOVENOUS MALFORMATION PELVIS AND PERINEUM: A MULTIDISCIPLINARY APPROACH

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## INTRODUCTION

Arteriovenous malformation of the perineum is a rare condition. Although most patients are asymptomatic but it may cause there is