

a thinner medial branch. Median nerve compresses the medial branch which may produce ischemic effects.

**Conclusion:** Knowledge of such variation is important for carrying out surgical procedure in the arm. It is also important for clinicians in day to day practice for measurement of blood pressure using sphygmomanometer cuff in the arm.

#### Conflicts of interest

The authors have none to declare.

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#### An heteroclit dual left anterior descending artery case report



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Presence and absence of myocardial ischemia forms the basis for categorising coronary artery anomalies. The left main coronary artery (LMCA) which takes its origin from left posterior aortic sinus bifurcates into left anterior descending artery (LAD) and left circumflex artery (LCx) branches. The term anomalous origin earns its relevance when right or left coronary artery arises from the opposite sinus (ACAOS). The incidence of anomalous origin of the left coronary artery from the right sinus were 0.15% among a total incidence of 1.07% for ACAOS (Angelini P, 2007). Variations in the origin and branching patterns of coronary arteries are significant to cardiologists, surgeons and anatomists. This case report describes the presence of dual LAD arising as a slender branch of LMCA from left aortic sinus and as a major branch from right aortic sinus. The LAD from left posterior aortic sinus had a major diagonal branch and the LAD arising from right anterior aortic sinus served the major role of the anterior descending artery. The area of supply appeared as normal though the course of the artery were stenosed at the proximal part. The left circumflex artery appeared to have normal course and branches forming a 'corona' along with its counterpart from right side. The above observations were noted during the prospective interpretation of angiogram images of a 60 year old Indian male who exhibited with clinical symptoms, ECG and ECHO abnormalities. Informed consent was obtained from the patient before reporting the case. The clinical significance of the anomalous origin will be explained in detail.

**Keywords:** Anomalous origin of coronary artery, Dual left anterior descending artery, Corona, Angiogram report

#### Conflicts of interest

The authors have none to declare.

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#### Situs inversus totalis – a case report



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**Objective:** Situs Inversus is a congenital condition in which the positions of viscera are reversed giving an appearance of a mirror image of their normal anatomical positions. An individual with situs inversus usually remains asymptomatic throughout life. The

diagnosis is usually made when one seeks medical attention. An autopsy case of hanging is reported where the rare phenomenon of 'complete situs inversus' was observed as an incidental finding.

**Materials and methods:** A dead body of 22 year male was brought to the mortuary of Pt J N M Medical College, Raipur for autopsy in suspicion of suicidal hanging.

**Result:** Thoracic Cavity: The heart was present a bit right to the midline with the apex pointing to the right side. Dextro positioning of great vessels was also noticed. Right lung had two lobes, while the left lung had three lobes. Abdomen: Oesophagus entered abdominal cavity through right crus of diaphragm and stomach was completely inverted in right subphrenic space. Spleen was also seen on right side of abdomen. Liver with gall bladder was seen in the left side. Caecum with appendix was located in the left iliac fossa.

**Conclusion:** About 25% of individuals with situs inversus have an underlying condition known as primary ciliary dyskinesia (PCD). PCD is a dysfunction of the cilia that manifests itself during the embryologic phase of development. Normally functioning cilia determine the position of the internal organs during early embryological development, and so embryos with PCD have a 50% chance of developing situs inversus.

#### Conflicts of interest

The authors have none to declare.

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#### Abnormal pattern of right renal vein – a case report



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**Introduction:** Variations in renal vascular morphology with supernumerary vessels are relatively common. Knowledge of such anomalies is important for urologists with regard to renal transplantation, nephrectomy, vascular anastomosis, selective catheterization and other renal surgical procedures.

**Objective:** To report on a case of duplication of the right renal vein and its clinical and surgical implications.

**Case report:** During the routine dissection of a 65 year old male cadaver, we have noticed two tributaries of the right renal vein draining the right kidney emerging from the hilum, joining together to form the common right renal vein and meet the inferior vena cava. The attachment of the right common renal vein is superior to the attachment of left renal vein.

**Conclusion:** Information about these variations is useful for urologists, vascular surgeons and radiologists, given that performing angiography prior to surgical interventions in the retroperitoneal space avoids complications, especially with regard to kidney transplantation.

#### Conflicts of interest

The authors have none to declare.

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