Pseudoaneurysms (PSAN) of the internal mammary artery (IMA) have been reported in the literature as a rare complication of central venous catheter placement. It is important to diagnose and treat them because a life-threatening conditions, such as hemothorax, may develop.

A 17-year-old female patient with thrombocytopathy presented with port catheter inadvertently placed through right IMA into the subclavian artery. After the removal of the port catheter a 9 mm PSAN at the origin of the right IMA was detected with duplex sonography.

Three days later, the patient complained of dull pain in the right supraclavicular region. CECT demonstrated right IMA PSAN measuring 9 mm, but symptoms and thrombocytopathy warranted active treatment.

What to do?
- Observation
- Endovascular treatment
- Percutaneous treatment
- Surgery

After ultrasound guided percutaneous injection of thrombin, the PSAN is completely thrombosed.

Discussion
Internal mammary artery pseudoaneurysms are rare and potentially life threatening. Asymptomatic PSANs can be observed, but in case of symptoms treatment is warranted. Percutaneous injection of thrombin can be an alternative to surgery or endovascular embolization in cases with good visualisation of PSAN with US. It can be safely and successfully performed even in patients with thrombocytopathy.