

☆ **Complex Clinical Cases**

**PULSATILE MASS IN THE THORAX CAUSED BY SYPHILITIC AORTITIS**

Poster Contributions  
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**Background:** Syphilis is a sexually transmitted disease caused by *Treponema pallidum*. In the tertiary phase (10-40 years after primary infection), it can lead to aortitis. It is characterized by inflammatory processes and necrosis of the medial layer resulting in aneurysm.

**Case:** 37-year-old man presented with chest pain and right infraclavicular pulsatile mass. Ten months earlier, he had suffered an ischemic, which was investigated and revealed a C677T gene mutation (hyperhomocysteinemia). Angiotomography identified an ascending aortic aneurysm (98 mm) with saccular formations, mural thrombi, and erosions of the right rib arches and sternum. Treponemal test and cerebrospinal fluid were reactive for syphilis, and negative HIV serology.

**Decision-making:** Following a 14-day treatment with ceftriaxone and benzathine penicillin, the patient underwent non-valved tube graft implantation. Histopathological examination confirmed syphilitic aortitis. The ischemic stroke experienced nearly a year before was possibly related to an embolic event from the mural thrombi in the aortic aneurysm.

**Conclusion:** Syphilis is a worldwide endemic disease, often forgotten. This case presents a dramatic manifestation of syphilitic aortitis with neurosyphilis and successful surgical intervention. It is important to emphasize the need for syphilis screening in all aortic disease. The absence of correct diagnosis can increase morbidity and mortality.

