

## The Vascular Trauma of the Right Axillary Hollow by A Metal Bar About an Operated Case

Modibo Doumbia<sup>1\*</sup>, Baba Ibrahima Diarra<sup>1</sup>, Diakaridia Traore<sup>2</sup>, Mahamadoun Coulibaly<sup>1</sup>, Bréhima Coulibaly, Bourema Dembele<sup>3</sup>, Layes Toure<sup>3</sup>, Salia Traore<sup>1</sup>, Siriman Koita<sup>1</sup>, Birama Togola<sup>3</sup>, Mamadou B Diarra<sup>1,3</sup> Bréhima Coulibaly<sup>1,3</sup> and Sadio Yena<sup>3</sup>

<sup>1</sup>Cardio-Pediatric ANDRE FESTOC CENTER, Mother-Child Hospital Luxembourg

<sup>2</sup>Department of Cardiology, Mother-Child Hospital Luxembourg Bamako

<sup>3</sup>Faculty of Medicine and Odontostomatology, University of Technical Sciences and Technologies of Bamako

### \*Corresponding author:

Modibo Doumbia,  
Cardio-Pediatric ANDRE FESTOC CENTER,  
Mother-Child Hospital Luxembourg,  
Tel : +22376013563.  
E-mail: modibodoumbia25@yahoo.fr

Received: 21 Mar 2022

Accepted: 08 Apr 2022

Published: 14 Apr 2022

J Short Name: JCMi

### Copyright:

©2022 Modibo Doumbia, This is an open access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and build upon your work non-commercially.

### Citation:

Modibo Doumbia, The Vascular Trauma of the Right Axillary Hollow by A Metal Bar About an Operated Case. J Clin Med Img. 2022; V6(6): 1-2

### Keywords:

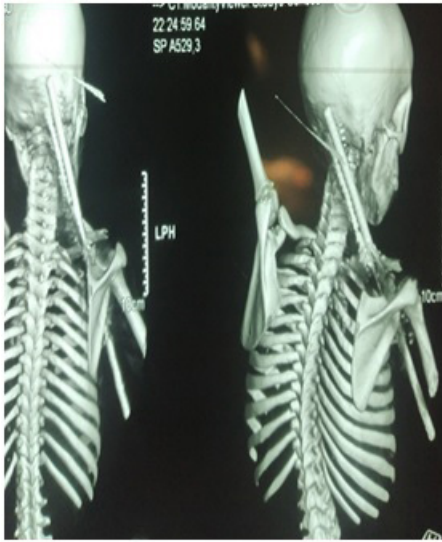
Hollow metal bar trauma

## 1. Case Report

A 12-year-old child with no known medical and surgical history admitted to the ANDRE FESTOC center of the Luxembourg hospital in BAMAKO for an open trauma to the right axillary hollow by a metal bar secondary to a domestic accident. On admission, he is hemodynamically stable with blood pressure 110/60 mmHg, pulse=93 beats per minute, respiratory rate 23 cycles/min. Good general condition was noted with colored conjunctivae. Locally, we note the presence of a metal bar crossing the axillary hollow (Figure 1 and 2) causing functional impotence with the presence of distal pulses (radial and ulnar). The rest of the exam is unremarkable. The scanner showed the presence of a metal bar without arterial lesion. The biology was normal. Faced with this picture, exploratory surgery was decided on in duplicate under general anesthesia. The surgical approach consisted of opening the delto-pectoral groove (Figure 3 and 4). Surgical exploration showed a complete section of the axillary vein without arterial or nerve damage. After general heparinization, manual removal of the metal bar. The closure of the different muscular planes. The clinical evolution is favorable.



**Figure 1:** The presence of a bar in the armpit.



**Figure 2:** Scanner showing the metal bar.



**Figure 3:** approach and postoperative image.



**Figure 4:** metal bar removal.