

Rad^{to}RadLearning

Focused tips from our experts

Pulmonary AVM

IR NATIONAL SUBSPECIALTY DIVISION



PEER LEARNING OPPORTUNITY

Often misidentified as a pulmonary nodule.



Clinically important to identify due to the risk for paradoxical emboli (TIA, stroke, brain abscess).



PRACTICAL INSIGHTS

- Most common in lower lobes.
- Female > Male.
- Treated with embolization by IR, recommend referral.
- Size of the feeding vessel is key (>3mm = call IR).
- Consider HHT if multiple pulmonary AVMs are present.
- Biopsy is contraindicated.



DIAGNOSIS CAN PREVENT STROKE AND ACCIDENTAL BIOPSY.

CLINICAL VALUE