

Acute arterial embolism



A 55 year old diabetic man with a history of coronary artery disease presented with acute piercing pain in the fingers of his left hand. The history of diabetes and heart disease, along with the clinical picture, dictated cardiographic investigation which was negative as was testing for cytolytic enzymes. The subsequent development of acrocyanosis of

the left extremity with punctate focal hemorrhages, led to a differential diagnosis between simple acrocyanosis, Raynaud's syndrome and, most likely, a distal arterial embolism. An embolus was located at the level of the supraclavicular artery, and surgical embolectomy was performed.